

SUMMARY

OF THE

2000 CHEMICAL STOCKPILE EMERGENCY
PREPAREDNESS PROGRAM

NATIONAL CONFERENCE

July 18 - 20, 2000

Excelsior Hotel
Little Rock, AR

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EXECUTIVE SUMMARY

The 2000 Chemical Stockpile Emergency Preparedness Program (CSEPP) National Conference was held at the Excelsior Hotel in Little Rock, Arkansas, July 18-20, 2000. The conference was attended by approximately 450 CSEP Program participants representing the U.S. Army, the Federal Emergency Management Agency (FEMA), other federal agencies, state and local governments, contractors, and other organizations involved in the program.

Plenary sessions were held at the beginning and the end of the conference, featuring state and federal officials from top executive levels of the program. The rest of the conference was devoted to breakout sessions on specific program-related topics. Breakout sessions were held on the following topics:

- C Automation
- C CA Guidance
- C Exercise and Training
- C Medical
- C Planning
- C PPE, Monitoring, and Decontamination
- C Public Awareness
- C Alert Notification / TAR Distribution
- C Collection Protection / Overpressurization / Enhanced Shelter
- C GPRA: Work Plans and Performance Measures
- C Phase-out / Close-down
- C Permitting Process and Readiness Certification

Each breakout session featured either individual speakers or panel discussions followed by questions and answers. Most breakout sessions were presented more than once to give participants flexibility in their choice of topics.

An additional feature to this year's conference was the conduct of pre-conference meetings on four topics of special importance to the program:

- C Exercise and Training
- C Medical
- C Planning Integration
- C Public Awareness

Each of these topics is the subject of an ongoing working group or Integrated Process Team (IPT). The results of the four pre-conference sessions were reported to the conference at large during the morning plenary session of the first conference day. In addition, comments relating to these topics were gathered during the conference breakout sessions, and reported back to the conference at large during the final plenary session on the second conference day.

Throughout the pre-conference and conference sessions, there was discussion of the Government

Performance and Results Act (GPRA) and how it would be implemented in the CSEP Program. A presentation on GPRA was included in each pre-conference session. Comments and suggestions relating to performance measures for CSEPP were gathered during the breakout sessions and were summarized in the final plenary session.

This report summarizes the proceedings of the conference including both the plenary and breakout sessions. Readers should please note that the report was compiled from notes taken by Argonne staff during the sessions, which were later edited and summarized. There were no formal transcripts or recordings made of the sessions. The note-takers made every effort to capture the essence of each presentation and subsequent questions, answers, and comments. However, it is possible that there are errors of omission or commission with respect to what was said and who said it.

ACRONYMS AND ABBREVIATIONS

ACA	Anniston Chemical Activity
ACH	air changes per hour
AEGL	acute exposure guideline level
AMC	Army Materiel Command
ANL	Argonne National Laboratory
ANS	alert and notification system
BDO	Battle Dress Overgarment
BRAC	Base Realignment and Closure
CA	Cooperative Agreement
CAIRA	Chemical Accident/Incident Response and Assistance
CAPT	Captain
CAR	Capabilities Assessment for Readiness
CEM	Comprehensive Emergency Management
COL	Colonel
chem demil	chemical demilitarization
CSDP	Chemical Stockpile Demilitarization Program
CSEP	Chemical Stockpile Emergency Preparedness
CSEPP	Chemical Stockpile Emergency Preparedness Program
DA	Department of the Army
DAC	U.S. Army Defense Ammunition Center
DCD	Deseret Chemical Depot
DCS	Defense Communication System
decon	decontamination
demil	demilitarization
DEQ	Department of Environmental Quality
DOD	U.S. Department of Defense
EAS	Emergency Alert System (formerly known as Emergency Broadcast System)
ECA	Edgewood Chemical Activity
EIS	environmental impact statement
EMA	emergency management agency
EMI	Emergency Management Institute
EMIS	Emergency Management Information System
EMPG	emergency management performance grant
EMS	emergency medical service
EMT	emergency medical technician
EOC	emergency operations center
EPA	U.S. Environmental Protection Agency
ESOH	Environment, Safety, and Occupational Health
ETO	Exercise and Training Officer
EXIPT	Exercise Integrated Process Team
FEMA	Federal Emergency Management Agency

ACRONYMS AND ABBREVIATIONS Cont'd

FEMIS	Federal Emergency Management Information System
FRP	Federal Response Plan
FY	fiscal year
GB	nerve agent
GPRA	Government Performance and Results Act
HAZMAT	hazardous materials
HAZWOPER	hazardous material worker operations
HD	Blister Agent (Mustard)
HEICS	hospital emergency incident command system
HQ	headquarters
HVAC	heating, ventilation and cooling
ICAM	improved chemical agent monitor
IEM	Innovative Emergency Management, Inc.
IPE	integrated performance evaluation
IPT	Integrated Process (Product) Team
IRF	Immediate Response Force
IRZ	immediate response zone
JCAHO	Joint Commission on Accreditation of Healthcare Organizations
JIC	joint information center
JIS	joint information system
LTC	Lieutenant Colonel
MCE	maximum credible event
MG	Major General
MOA	memorandum of agreement
MOU	memorandum of understanding
NCD	Newport Chemical Depot
NCP	National Contingency Plan
NRC	Nuclear Regulatory Commission
ODASA	Office of the Deputy Assistant Secretary of the Army
OMB	Office of Management and Budget
ORISE	Oak Ridge Institute for Science and Education
ORNL	Oak Ridge National Laboratory
OSC	On-Scene Coordinator
OSHA	Occupational Safety and Health Administration
PAD	protective action decision
PAO	public affairs officer
PAPR	powered air-purifying respirator
PAR	protective action recommendation
PAZ	protective action zone
PBA	Pine Bluff Arsenal
PCA	Pueblo Chemical Activity
PIO	public information officer

ACRONYMS AND ABBREVIATIONS Cont'd

PMCD	Program Manager for Chemical Demilitarization
PNNL	Pacific Northwest National Laboratory
PPE	personal protective equipment
PWG	Planning Working Group
QRA	quantitative risk assessment
RAID	Rapid Assessment and Initial Detection
RCRA	Resource Conservation and Recovery Act
REP	radiological emergency preparedness
RTAP	Real-Time Analysis Platform
SAIC	Science Applications International Corporation
SBCCOM	Soldier and Biological Chemical Command
SIP	shelter-in-place
SRF	Service Response Force
START	simple triage and rapid treatment
TAR	tone alert radio
TCP	traffic control point
UCA	Umatilla Chemical Activity
UL	Underwriters Laboratories, Inc.
USACHPPM	U.S. Army Center for Health Promotion and Preventive Medicine
VX	nerve agent
WMD	Weapons of Mass Destruction

1 PRE-CONFERENCE MEETINGS

1.1 Exercise and Training

The exercise and training meeting began with an introduction and a presentation on Chemical Stockpile Emergency Preparedness Program (CSEPP) national performance measures by Dan Civis of the Federal Emergency Management Agency headquarters (FEMA HQ). The meeting then broke up into individual caucuses (Army, FEMA Regions, and States). The caucuses then reported their discussions back to the group. After the caucus reports and discussion the group received presentations from several speakers.

Presentation #1: Caucus Reports

The Army caucus discussed training and use of automation systems. There was discussion regarding the new evaluation system to be piloted in Deseret Chemical Depot (DCD) Pine Bluff Arsenal (PBA), and Anniston Chemical Activity (ACA), including the number of evaluators that would be needed and the length of time to be committed for the evaluation process.

FEMA regional staff raised the question of cost for the new exercise evaluation and time commitments and discussed related issues such as compensation for state and local personnel if the exercise time is extended, the importance of federal evaluators in responding to requests for lengthy time frames of participating in the exercise, and out-of-sequence events and weekends.

The States discussed participation in exercises during the quarterly Chemical Accident/Incident Response and Assistance (CAIRA) drills. They also raised a question as to exercising reentry and recovery; Program Managers have been consistent in their reply that this is a response program and does not cover reentry and recovery.

Discussion for presentation #1:

Jim Aldridge of Alabama had questions on “return” and “release from shelter.” He requests additional guidance from the program.

The State Caucus discussed the need for a policy group to work out issues regarding the initial stages of reentry and recovery. The State Directors and the Army (D. Fisher, ODASA(ESOH)) agreed that this was beneficial.

Emergency Management Information System (EMIS) or Federal Emergency Management Information System (FEMIS) training: The U.S. Army Defense Ammunition Center (DAC) in McAlister, OK, is still around to provide training. FEMIS training needs a training document / user’s guide to supplement the “desk reference.”

The Army voted at the Planning Working Group (PWG) that no installation would take FEMIS over EMIS. FEMIS does not meet the installations’ needs for initial notification.

LTC Lantzer of the Soldier and Biological Chemical Command (SBCCOM) briefed the group on the “one system” decision. There was discussion between and Installation Commanders on use. Test bed evaluation results indicate anomalies in FEMIS. In the week of August 21-25, in Alabama, another evaluation of FEMIS will be done, in addition to information provided from the off-post communities. A final recommendation will be made with a decision is expected to be reached by 1 October 2000.

Exercise evaluator course: Based on the previous evaluator course, two meetings have occurred to develop the main body of course materials. Day 1 is mostly done, awaiting Day 2 and 3 material. A pilot course will be offered at Pueblo the last week of August.

Evaluation skills are being emphasized and video training is being adapted to facilitate the training of those skills.

Integrated Performance Evaluation (IPE) pilot testing: Pilot tests will be held at DCD in September, PBA in February 2001, and ACA in March. Training, exercise planning and other areas are being developed and modified to facilitate the pilots.

Presentation #2: Integrated Performance Evaluation (Lorin Larsen, State of Utah)

Previous Exercise and Training Officer (ETO) meetings recommended that the objectives and the exercise evaluation approach be modified. In response to that recommendation, the Exercise Integrated Process Team (IPT) has developed an IPE approach. This approach looks at seven response “functions” that are integrated, not 15 “objectives.” The results of the initial pilot indicate that this approach will provide enhanced evaluation for the exercise. This uses a team approach to the evaluation and development of the written report.

Another part of the pilot was the creation of the “Community Profile.” This is the Community’s self assessment of their readiness and capabilities compared against the CSEPP Benchmarks and exercise objectives.

Presentation #3: Exercise Scheduling (Ron Barker, FEMA)

Mr. Barker had Matt Matia of TRW pass out CDROMs with the exercise reports since 1996 and a database of evaluators. He discussed exercise dates for fiscal year (FY) 2002.

Bill Smith of the State of Maryland explained why Maryland asks for the month of April every year. The National Hurricane Conference drives the MD exercise dates along with the FEMA/ Nuclear Regulatory Commission (NRC) Radiological Emergency Preparedness (REP) exercise cycle. The other reason is scenario realism: a leaking ton container is more plausible during warm weather.

Presentation #4: FEMIS Training (Dave Galgani, SBCCOM Liaison to FEMA HQ)

Mr. Galgani asked for input from the group regarding FEMIS training. What is the effectiveness of FEMIS training? Participants commented that you cannot meet notification time requirements using FEMIS for installations with short time constraints. Also, the training deliverables as provided do not meet the installation's needs. Of the group, 6 people had taken FEMIS training and they all considered it less than fully effective.

Presentation #5: CSEPP Training (Bob Norville, FEMA HQ)

PIO training: There is self-paced training for personnel working in the joint information center (JIC) from on- and off-post. It is on a floppy disk with binder. It is capable of being updated after being downloaded from the CDROM. The advanced JIC course will be given 8-12 August at the Oak Ridge Institute for Science and Education (ORISE) with 30 spaces available. It was last offered 4½ years ago. It goes beyond the regular Argonne National Laboratory (ANL)-provided JIC/JIS course. It focuses on technology and adaptation of technologies into the JIC.

Science Applications International Corporation (SAIC) medical training: SAIC budgeted for 16 occurrences of training or exercise support. They received requests for Year 2000 and filled all opportunities. They are now receiving requests for 2001. These are train-the-trainer type sessions. A participant asked about SAIC Medical Internet training. Mr. Norville replied that FEMA was briefed by SAIC on computer-based medical training but it is not feasible.

FEMA is putting a lot of CSEPP training on the web. See distributed sheet.

There was discussion of the training survey that was performed. It showed wide variation among the communities as to percentage of staff that have received CSEPP-specific training.

Training contracts coming up in FY01: Oak Ridge National Laboratory (ORNL) and ORISE currently have training contracts. JIC training may go to the Army for program management.

The REACT FAST training course will be updated to incorporate the use of the "Kapler" suit by the majority of the communities. Personal protective equipment (PPE) training also needs to be updated to incorporate different applications and hoods, aprons, and powered air-purifying respirators (PAPRs). FEMA will be cautious when updating training.

The State Directors meeting resulted in a request for training of decision makers for CSEPP.

New Business:

The next ETO meeting was proposed for November 29 and 30, 2000, at FEMA Region VIII . Follow on meeting to be held on 22-23 May, 2001 at FEMA RegionV.

1.2 Medical

Ms. Lisa Hammond (FEMA Region VI) and LTC (Dr.) David Mukai (SBCCOM) hosted the meeting. They welcomed the approximately 90 participants and emphasized that the meeting was organized to encourage participation, to identify and discuss issues, and to share experiences and best practices. Representatives from all CSEPP states were in attendance.

Ken Hudson, SAIC, facilitated the meeting. He explained the format and agenda for the pre-conference meeting and the medical components of the National Conference to follow this meeting. He reviewed the medical survey responses used to form the basis for the pre-conference meeting and the conference breakout sessions. Mr. Hudson then provided a brief overview regarding the introduction of “performance measures” into the CSEP Program.

Presentation #1: Larry Skelly (ODASA-ESOH):

Mr. Skelly of the Office of the Deputy Assistant Secretary of the Army (ODASA) for Environment, Safety, and Occupational Health (ESOH) gave a presentation on the concepts and efforts needed within the CSEPP community to implement the Government Performance and Results Act (GPRA) of 1993. He explained that federal agencies are required to report project performance information to Congress. While the GPRA is not mandated at state and local levels, information is needed from those levels to develop the report to Congress. He then reviewed the planned approach by FEMA and the Army that identifies four "performance measures" that could be used in CSEPP. Mr. Skelly suggested that the attendees think about linkages from specific activities conducted in the medical community to the four performance measures as they engaged in discussions during the conference.

Presentation #2: Sharon Wilcoxson (Colorado) and Debbie Kim (Utah)

Ms. Wilcoxson and Ms. Kim gave a joint presentation on establishing and measuring medical response performance within their respective CSEPP medical communities. Both suggested that performance measures are part of a larger process designed to improve overall hospital performance. Ms. Wilcoxson discussed how it was necessary to change the direction within her medical community. She mentioned how they focused on customer service, not industrial efficiency. Ms. Wilcoxson discussed one of the performance improvement techniques that both she and Ms. Kim support. Called “FOCUS PDCA,” it is defined as follows: (note the underlined letters) the organization Finds a process to improve, Organizes an improvement effort, Clarifies current knowledge of the process, Understands the source of process variation, Selects the specific components, then implements the decision by building a Plan, Doing the required action, Checking the results, and Addjusting as needed. It was emphasized that the plan should be realistic, consider available resources, and be flexible. The presenters noted that it is during the checking part of the larger process that performance measures come into play. They both explained that the process they used to identify and implement changes was supported by the hospital administrators. The need to look outside their industry for ways to do a better job was also emphasized. In discussing the various improvement techniques, Ms. Kim and Ms. Wilcoxson noted that the answers to the following basic questions need to be considered: (1) Why have a measurement

without an improvement process in place? (2) Who are the customers? and (3) How were the measurements developed?

Q & A for presentation #2:

Q: How do you get the administrators involved?

A: By observing what is occurring in the hospital and making your presence known. Show administrators that improvements are needed and that the changes can reduce the “bottom line.” Show the administrators that improvement is important to their hospital. One important question to ask is, “Is there an increase in care vs. an increase in paperwork?”

Comment: Most organizations keep and provide statistical records on such things as how many people are trained, etc., as a way to measure performance; however, there is concern that there is no way to evaluate the support from the State, Region, and FEMA Headquarters. If the system is to succeed there needs to be a way to evaluate management as well.

Presentation #3: CAPT John Hoyle (US Public Health Service (PHS))

Captain Hoyle discussed the background for and the activities conducted at the Noble Training Center for Medical Response located at Fort McClellan, AL. The mission of the center is to formulate, train for, and evaluate medical response to incidents involving weapons of mass destruction. They have or are developing courses to train emergency medical technicians (EMTs), physicians, administrative personnel, nurses, executives, hospital engineers, and others to work as a team. They use a model hospital environment and are co-located with the Department of Justice training facilities. Training courses for emergency medical service (EMS) personnel will start in October 2000. They are developing a program for hospitals that will teach people how to protect themselves and their facilities. They are also developing training to address agricultural problems. Plans call for training 100 individuals interested in agricultural concerns in September 2000. The hospital training program is scheduled to begin in January 2001.

Captain Hoyle reported that the Center is doing applied research in several areas. For example, in developing decontamination capability, they are advocating using soap and water rather than chlorine and are examining other methods and products to do the job. They have found that they can improve the mass decontamination process by converting to industrial sized shower heads. Further, they support conducting decontamination outside medical facilities to avoid internal contamination and advocate the dual use of facilities and space. He explained that hospitals need to do their own decontamination because it is unrealistic to assume people coming to hospitals will always be decontaminated. In addition, they are designing manikins to test emergency room response. He emphasized that the Center for Domestic Preparedness and the PHS are working together in developing training programs.

Captain Hoyle’s presentation concluded with the statement that the training center does provide funds for travel and per diem to state and local personnel involved with weapons of mass destruction (WMD) planning and response to participate in the various training programs offered or being developed by the center.

Q & A for presentation #3:

Q. Where are the signup sheets for training?

A: Please provide me contact information and we will forward you program information.

Q. What is in the EMS training?

A. Information on how to protect yourself, personal protective equipment, etc.

Discussion: Ken Hudson of SAIC discussed the medical interest survey responses used to organize the pre-conference meeting and conference breakout sessions. The 41 issues identified were categorized into 10 areas, sent to the medical emergency management coordinators, and prioritized by them. The top four of these 10 areas were used as main discussion subjects for specific conference breakout sessions. The group gathered for the pre-conference meeting was given the opportunity to discuss the six remaining areas that would not be addressed in a specific conference breakout session. The group focused on issues such as: training and exercises, how to get other organizations to participate in exercises, how to stress the system, and budgeting considerations for overtime.

Regarding approaches used to conduct exercises, Ms. Wilcoxson stated that her hospital uses a “box drill” approach that focuses on each hospital functional area individually until all the functional areas in the hospital have participated. In contrast, Ms. Kim stated that in Utah, they have found that a community effort is needed that includes all response organizations. Both Ms. Wilcoxson and Ms. Kim agree that the approach to improving overall capability is to train first, exercise, then make necessary adjustments. In addition, they suggested trying to make the exercise fun so that it can generate interest among the participants and consider using unannounced exercises between on-post and off-post organizations to test communications.

The group then discussed the problems created and lessons learned from the recent incident in which the highway message board announcement designed to address hazardous weather conditions inadvertently activated the CSEPP alerting system.

The presentation concluded by showing a short video of a drill involving simulated victims in a gunshot scenario that was conducted at a school in Oregon and involved all response organizations.

Presentation #4: Dennis Hudson (Jefferson Regional Medical Center, Kentucky):

Mr. Hudson discussed the background and rationale for use of a hospital incident command system. He outlined the ten top weaknesses in the emergency planning process and the three obstacles to obtaining hospital participation which include: (1) obtaining a commitment to the planning process (it must be viewed as part of the hospital's primary mission and is influenced by competition over the issues of “ownership” and “superiority”), (2) overall competency level of the individuals, which is often limited by lack of available training and vague regulatory requirements, and (3) cost to the organization (emergency planning is a resource intense process, and preparation is not reimbursable). Mr. Hudson then described the components of an ideal

healthcare response system. A solution to many of the problems in emergency medical response appears to be adopting a management process like the Hospital Emergency Incident Command System (HEICS) that was pioneered and is now mandated for use in California. Mr. Hudson described what the HEICS can and cannot do and how the concept is being implemented in the Jefferson County Regional Medical Center, Kentucky. He concluded his presentation by describing the problems and lessons learned when the HEICS concept was being developed and implemented.

Q & A for presentation #4:

Q: Was training in the HEICS sufficient for administrators to function in the decision process?

A: Yes. Use of the HEICS is a medical resource intense process. For that reason there is a need for the administrators to understand the system and to be part of the decision process; however, they do not necessarily have to be at the actual scene of the incident to participate.

Discussion of other medical issues:

The group continued discussion of issues related to training and exercises. Utah included training for administrators who gradually accepted the need for expanding hospital involvement beyond the emergency room. It was suggested that coordinators look at Occupational Safety and Health Administration (OSHA) guidelines to help avoid confusion as to what level of training needs to be developed and presented. Further, it was stated that core training should be expanded to meet new needs. To encourage participation in training, two things were suggested: (1) cross-linking CSEPP and WMD programs, and (2) including CSEPP-specific training in the “all hazards” training program. Many people believe that WMD presents a greater risk than CSEPP-related emergencies and could help develop interest in participating in (CSEPP-related) training programs. The subject of incorporating veterinary and agricultural concerns into CSEPP arose. Some individuals would like to see more written guidance on these areas. Others suggested including animal control in the planning process and also, as with the use of poison control centers, in responding to queries from the public. Further, it was suggested that this area should be included in exercises.

1.3 Planning Integration

Presentation #1: Welcome and Introductions (Joe Herring, FEMA and Dennis Legel, SBCCOM)

The speakers acknowledged the efforts of the Planning Session Advisory Group. The importance of planning and integration was discussed. All aspects of preparedness were open for the group to consider. Depot and county plan integration has to be a priority. There should be a seamless integration. A survey was sent out to planners and coordinators to ascertain which planning topics are most urgent. The responses pointed to the following topics: (1) off-post notification, (2) sheltering and sounding all-clear, (3) protective action recommendation (PAR) / protective action decision-making (PAD), and (4) case study: Cerro Grande fire.

The speakers invited comments on whether there is a need for an on-going planning group. The consensus was that first we need to identify if products are needed to solve planning problems.

Presentation #2: Transitioning to Performance Measures (Dan Civis, FEMA)

Why institute performance measures? Strategic plans are now required as are performance plans. Congress wants to control spending and we need to justify program expenditures. The information must come from the bottom up in terms of setting program performance measures and evaluating their achievement. Performance measures were developed by a stakeholder advisory group. The original proposal was 40 measures; these have been narrowed down to four. We are still seeking input as to how to implement the process and streamline reporting. The transition will not be an overnight process. FY 2001 guidance will be out by September, first reports due by January (maybe). Technical assistance will be available for writing workplans and performance measures.

Q & A for presentation #2:

Q: Steve Douglas, Pueblo County: will there be copies of the presentation available?

A: Yes in back of room.

Presentation #3: Planning vs. Program Management (Panel consisting of Randy Hecht, FEMA Region IV; Steve DeBow, State of Washington; Jim Miller, Deseret Chemical Depot; Marianne Rutishauser, Tooele County, UT; and Don Broughton, Madison County, KY.)

The panel addressed planning and program management at the executive and staff level. Planning takes place at two levels: strategic and tactical. The Program Manager does the strategic planning and the planners do the tactical. The program should integrate tactical planning into a continuous cycle of planning, training, and exercising. Resources must be identified to implement plans and address problems identified.

Q & A for presentation #3:

Greg Moser, Colorado: propose a national planning group.

Dan Griffiths, FEMA Region VIII: Strategic planning requires buy-in from everyone. A planning group is a good idea. You can't plan in a vacuum.

Doug Davis, PCD: There is no time for another group; already there are several IPTs, working groups, assessments, etc.

Doug Stroud, Newport Chemical Depot (NCD): On the surface it sounds fine but there already is planning guidance to use in developing a strategic plan.

Discussion ensued about rewriting the planning guidance. The group considered it important not to reinvent the wheel.

Joe Herring, FEMA: A blue ribbon panel could be convened to revise the planning guidance. It would have to be fast. Would require energy and work.

Don Broughton: Look at case studies such as the Eunice, (sp?) Louisiana train derailment where folks were evacuated for a week.

Dennis Legel: the key is to identify any needed planning products.

Steve Douglas, Pueblo County: Good exercise design must come first.

Joe Herring: We should share best practices such as memoranda of agreement (MOAs), plans, etc. via a website.

Gary Scronce, Innovative Emergency Management (IEM): Manual boards could be established. If someone needs a question answered they could access an assistance line. Surveys/ballots are in the resource room. Thoughts will be compiled by plenary session.

Dennis Legel: What products would we need? What issues need to be resolved?

Marianne Rutishauser: Hopefully plans are in place after 9 + years. We probably don't need a (planning) group. How do we integrate CSEPP with non-stockpile plans?

Carl Ballinger, Pueblo County: does anyone have a plan to screen evacuees? How are we going to stop and screen a thousand cars even if we ask basic questions?

Deanna Westover, Benton County, WA: We were told not to do this. Just designate sites for the public to visit to be screened. If they think they are exposed they can stop. If they want to avail themselves of shelter they must go through reception center and screening.

Barry Walker, Arkansas: We use 13 modified decon trailers that go to reception centers.

Doug Davis, PCD: one topic that needs to be addressed deals with the reverse of evacuation. That is, when depot needs off-duty employees and augmentees to come into the depot, what arrangements need to be made to get them through traffic control points?

Terry Hobbs, FEMA HQ: Another topic is once you shelter, issue PADs, then how do you decide to release people? Mike Myirski will address that later.

Doug Stroud, Newport Chemical Depot: Why not put research onto website?

Mary Beth Vasco, ANL: Be sure to caveat information put on the website in case there are any legal deficiencies with the documents.

Gary Scronce: put information into CSEPP-community-only part.

Meg Capps, Umatilla County: another issue--how do you declare an area safe with Improved Chemical Agent Monitors (ICAMs) and Real-Time Analysis Platforms (RTAPs)? How functional are those? How sure is that method?

Don Broughton: There is a perception that sharing information may cost money because everyone will want everything. This is not the case. People want to share the information.

Dennis Legel: Utah and Oregon have a lot of information to exchange. We can create an e-mail directory to exchange relevant information.

Steve DeBow: What is the possibility of combining the IPTs as an alternative so everything is integrated and the number of meetings decreased? Maybe an integration meeting?

Anna Rae Garrett, Utah: That idea wouldn't work because most places limit the number of people that can go to a conference.

Everett Woodruff, Clark County: What happens if the lead person is gone? The back-ups need training. Courses can be made available. Could have a CSEPP training week at the Emergency Management Institute (EMI).

Don Broughton: We need to establish a certification process. Professional development curriculum at EMI is available.

Meg Capps: The group could discuss activation of tone-alert radios (TARs) and get into training issues.

Carl Ballinger: What do you do and how to plan for a false activation? (need guidance).

Marianne Rutishauser: Can you just have a planning conference call once a month or when needed? Can share info via e-mail, fax, etc.

Meg Capps: Our pilot project is kicking off next Monday on public awareness. We will do surveys to monitor progress.

Doug Stroud: Was the media campaign coordinated with the Outreach Office?

Meg Capps: Yes they are kept in the loop. The Outreach Office is an active participant. The Depot and both public affairs officers are involved as well as the states, counties, etc. Ideas will be shared.

Don Broughton: Everyone should have chemical awareness training. Ninth graders in Kentucky took the same course without the test. If you have the opportunity take the class out to your local schools, you'll get good response.

Presentation #4: Off-post Notification (Don Broughton, Gary Scronce, Charles Williams and Don Brodersen)

The panel discussed issues of procedure and policy regarding notification to offpost authorities and protective action decision making. Particular emphasis was given to identifying key elements of information that are needed in the first few minutes of an emergency. Each community has established its own procedure for initial notifications.

Q & A for presentation #4:

Steve Douglas, Pueblo County: IEM's document does not clearly reflect what has been done in Pueblo. Needs to be updated.

Gary Scronce: the IEM document does not represent current status of notification forms.

Don Broughton: Who has PAR/PAD forms?

Marianne Rutishauser: I brought a form that comes from DCD; it looks at the workplan for the day along with the maximum credible event (MCE). DCD sends workplans with worst case scenario and PARs to Tooele County. Tooele County takes the form and workplan and looks at met towers and confirms zones or adjusts them based on plume and affected area. Tooele County imports data and then uses a PAD form which details step by step how to implement PAD and in what order. It is sent out to DCD and other counties. This is done a few times a day if wind direction changes (30 degrees or more) or if MCE changes or stability class changes.

Meg Capps: Is there a copy of the form?

Answer: DCD and Tooele County will share them in the resource room.

Marianne Rutishauser: We also have a heads-up form. DCD calls about non-surety events which puts the county into state of readiness.

Joe Herring: What about the DCD incident?

Jim Miller: The notification call was not made. The county needs to be informed of anything, since the public may misinterpret an event. Let the county know everything. A lot of training is taking place at DCD. No matter how good plans are, you still have the human element. Training is important; follow plans and procedures.

Don Broughton: One site has different forms on- and off-post.

Marianne Rutishauser: The Utah hotline provides rapid notification. Off-duty hours dispatchers have the information and take the lead. There is a problem because they don't work with this every day. The county established a training program for dispatchers so they can understand the form/procedures.

Steve Douglas: In Pueblo notification works both ways. If something off-post happens which might affect the depot, the county notifies the depot.

Don Broughton: Madison County will send the depot a form detailing what roads might be closed.

Presentation #5: Army Toxicity Standards (Mike Myirski, SBCCOM)

The U.S. Environmental Protection Agency (EPA) National Advisory Committee on Acute Exposure Guideline Levels (AEGLs) published proposed AEGLs for sulphur mustard (HD) in the Federal Register on March 15, 2000. Proposed AEGLs for GB and VX will be presented to the Committee shortly. CSEPP modeling and automation systems will be updated once the toxicity standards have been finalized. There is potential impact on planning where agent VX is involved.

This process and the types of standards it produces are the same as that used for other hazardous chemicals. It departs in some ways from the process that the Army used before.

The proposed model is called the toxic load model. It reflects that a high concentration for a short period of time has much higher consequences than a low concentration over long period of time. By way of analogy, drinking a 6-pack of beer in an hour will be more toxic than if you drink the same 6-pack over 6 hours. The proposed mustard standard shows a lower toxicity than was previously estimated. However the VX standard is anticipated to show a higher toxicity than previous estimates.

Risk assessments may be affected by the revised toxicity standards once the phase-two Quantitative Risk Assessments (QRAs) are updated by the chemical demilitarization (chem demil) program. All eight sites will have a phase-two QRA. Anniston and Umatilla are due this year then Pine Bluff.

What does this mean? Once the EPA promulgates standards, DA will accept them and get the information incorporated. The biggest effort will be for VX.

As far as planning goes, perception is the issue. The storage risk far exceeds demil risk. Typically there is 100 times greater risk from storage than disposal operations. Tooele is much safer now because of all the destroyed chemical weapons. (Ten times less likely to have a fatality). The most hazardous weapons went first.

The effect of altered toxicity standards on planning should be small. If you sheltered in place before, then shelter in place still, if you evacuated, then continue to evacuate.

Q & A for presentation #5:

Dave Holm, Colorado: how will this affect Colorado and Kentucky?

Mike Myirski: QRAs are not yet planned because there is no demil technology selected.

Dave Holm: Is there a plan in place to do a QRA once that decision is made?

Mike Myirski: Demil will do this once a technology is chosen.

Presentation #6: When to sound the all clear signal for those sheltered in place? (Mike Myirski, SBCCOM)

Sheltering in place is a simple, common response measure to chemical hazard threats. It is simple to implement. In CSEPP there are four levels of sheltering: (1) normal (go inside, close doors and windows, turn off heating, ventilation and cooling (HVAC), and retreat to interior room); (2) expedient (normal plus use of tape, plastic sheeting and towels to seal off cracks and vents); (3) enhanced (normal plus winterization measures taken in advance); and (4) collective pressurization. Agent concentrations and dosage received indoors are reduced depending the rate of air infiltration, which can be expressed in Air Changes per Hour (ACH). Experimental data suggests protection factors ranging from 3 to 100 can be achieved for normal or expedient sheltering depending on ACH and time duration of exposure. However, to minimize exposure for those sheltered it is critical to exit the shelter when outdoor concentrations drop below indoor concentrations. You cannot wait until outdoor concentrations drop to zero. The optimal response can be considered a “delayed evacuation” in the sense that you shelter for a while, then evacuate.

Q & A for presentation #6:

Clark Combs, Kentucky: how far out are the equal dosages?

Mike Myirski: If you keep person sheltered in place indefinitely the areas under the curve are same, that is, exposure amount (dosage) is identical. If you can get everyone out before the plume gets there, then you should evacuate. Sheltering in place can be beneficial if evacuation is not feasible.

Len Motz, ANL: Is there anything currently available to run calculations to determine the possible amount of exposure in the shelter?

Mike Myirski: The ball park estimate of when those people should evacuate the shelter is to use the departure time of the plume.

Doug Stroud, NCD: Expressed the concern that there should be some type of monitoring done before releasing people from shelters.

Mike Myirski: Because we are dealing with vapor and not liquid there was no way to conduct complete monitoring in a timely fashion. In summary, for almost all areas close in, sheltering in place was going to be the answer as it was better no matter how long you shelter. It is better than being exposed during evacuation.

Steve Douglas explained that using the current tools, i.e. computer models and plume plots, we need to look at not a minute-by-minute evacuation but an hourly evacuation so that people are in

fact chasing the plume. Mike Myirsky stated that he agreed the models are not meant to give you a minute-by-minute display but a general direction and time of the plume.

Presentation #7: Response to the Cerro Grande (Los Alamos) Fire of May 2000 (Buddy Young, FEMA Region VI Director)

Mr. Young distributed a handout with a chronology of events and summarized the key points. The fire started on May 5 as a prescribed burn that got out of control. On May 10 FEMA got involved. The state requested a fire suppression grant to cover the cost of firefighting and a Presidential Emergency Declaration, which was issued. The town of Los Alamos evacuated (11,000 people). On May 11 FEMA opened up a Regional Operations Center to communicate with the state and sent a liaison to New Mexico. On May 13 a Disaster Field Office was deployed and Federal Coordinating Officer appointed. Also a Presidential Disaster Declaration was requested and made. Since the fire was started by a federal agency, federal resources were brought in.

Issues arose as to who was in charge and who was coordinating. The Federal Response Plan was activated. A joint information center (JIC) was established and led to coordination of information going to the media and the public. People were evacuated for about 7 days. Local government officials decided who got to come back and when. Lab officials decided when the lab could reopen. The public didn't believe the Lab officials' assurances about radioactive contamination. Independent monitoring stations were established. Plane overflights were conducted to sample air. This held up re-entry. People whose houses had burned went by bus to tour the fire area. Problems arose with debris removal. Folks want 100% reimbursement. FEMA does not grant 100%. It provides public assistance and individual assistance but does not make anyone whole. The local government wouldn't start clean up because they were afraid they would have to pay the other 25%. Congress had to enact special legislation. Legislation passed last week for \$500 million to make everyone whole. FEMA has authority to administer the program. It will take 2-3 years to settle all the claims. What is reimbursable? Someone will have to make that decision.

Q & A for presentation #7:

Q: Only a few hundred people stayed in shelters. Most folks stayed with friends or relatives or in hotels.

A: FEMA and the Corps of Engineers provided temporary housing. They set up a mobile home park for about 160 families. Established it for up to 18 months. The time it takes to implement this type of operation depends on local building codes.

Q: Were there homes that burned that weren't insured?

A: Yes, special legislation should make folks whole. FEMA will administer the special funding which is the sole source of money for victims.

Presentation #8: Guidance on Shelter in Place kits (Don Broughton, Madison County, KY)

Mr. Broughton discussed the value of sheltering in place kits, what's in them and procedures for distribution to the public.

1.4 Public Awareness

Presentation #1: Welcome by Russell Salter, FEMA

Russell Salter, Director of FEMA's Chemical & Radiological Preparedness Division, welcomed all participants to the Public Awareness Session. Mr. Salter stated that as public affairs/information officers we have the challenge of making sure that three messages are conveyed to the public:

1. Awareness that the CSEP Program is out there.
2. Knowledge as to what actions to take and the importance of taking them in an emergency.
3. Confidence that the public will do what they're supposed to do in a CSEPP emergency.

Mr. Salter also charged the public affairs community with establishing a performance-based awareness plan with measurable outcomes for each CSEPP community. He requested that these FY 2001 plans be "in place" by the end of this fiscal year, September 30.

Finally, Mr. Salter announced the formation of a public affairs Integrated Process Team. Steve Horwitz and John Yaquiant would provide more information at a later date.

Presentation #2: Performance Measurement for the Public Information Officer (Pattijeau Hooper, Facilitator, Little Dog Communications, Lynnwood, WA)

Ms. Hooper presented information on developing a communication plan with measurable objectives. She noted that communication is not an extremely tangible product, and therefore, the object of a public communications campaign is to join publics together, in this case the public and a CSEPP.

Ms. Hooper discussed the three elements of an effective communication campaign. The first is research; you must understand who the public is - all the publics in your community. You must take the time to do research to know your public. The second element is implementation; you plan and complete the actual campaign - news articles, advertisements, etc. The third element is evaluation/measurement; evaluate how things get done (teamwork, conflict, use of volunteers, amount of prep time) and product effectiveness (effectiveness of the calendar, the radio ads, etc.). What would you do differently next time?

Ms. Hooper cited the following examples of performance measures for communication campaigns:

- Survey

- Collect narratives – these can give you feedback about how effective your campaign was.
- Videotapes – see why your presentation was or wasn't effective.
- Focus groups.
- Amount of participation – how many did you reach?
- Depth of participation – how well did you reach them?
- Associated supportive voices – endorsements from community leaders.
- Word of mouth.
- Common community knowledge.
- Visual image association.
- Understanding why it failed – the “coulda, woulda, shoulda” of the situation.

Ms. Hooper asked the participants to break into groups and brainstorm different outreach campaigns and how they would measure the effectiveness of the campaign. Several of these campaigns will be included in the Public Awareness Plan for FY 2001 Straw Man to be developed by Argonne National Laboratory.

Presentation #2: Umatilla Media Campaign and Public Outreach

The presentation was given by a panel consisting of CSEPP Public Affairs Officers (PAOs) and Public Information Officers (PIOs) from the Umatilla area: Jesse Seigal (FEMA Region X), Mark Clemens (WA State), Cheryl Humphrey (Umatilla County), Lenore Pointer (Morrow County), Korenza Burris (Benton County), and Jim Hackett (UCD).

The Umatilla Public Information Group discussed its upcoming media campaign intended to teach people what to do when they hear the sirens. The message is “CSEPP - It works with you.” The objective is to gain attention for the program, change attitudes, build credibility, and build a brand name, “CSEPP.” Four television commercials were played for the audience. A copy of the first print ad also was displayed.

The campaign is funded through FEMA. The effectiveness of the campaign will be measured by surveys and analysis of telephone inquiries. The group discussed the baseline survey that was conducted before the media campaign was developed. Approximately 800 residents were called at random. These baseline results helped shape the campaign. Two additional surveys will be conducted, one midway through the campaign and one near the end.

The Umatilla group anticipates receiving numerous telephone inquiries for additional information from people who see the media campaign ads. In addition to the surveys, the Umatilla group developed a telephone inquiry form to gather information from the callers. The form asks callers for the ad, media outlet, caller's name, residence, phone number, concerns, questions, whether additional information needs to be mailed out, and any follow-up action to be taken. This information will be analyzed to help evaluate the effectiveness of the media campaign.

The campaign, which includes television, radio and newspaper ads, begins the week of July 24 and ends the week of January 8, 2001.

Umatilla Chemical Depot Lessons Learned

The group discussed the lessons learned as a result of recent events at the depot (bomb threats and a non-surety chemical release). The Umatilla Public Information Group learned they needed to get the word out to the community more quickly. They found that using a “blast fax” was the quickest way to get the news release out to the media and, ultimately, the public.

Community Outreach

The Umatilla Group discussed its success with several recent community outreach activities. For example, the Umatilla community linked together different events (centered around the annual exercise on May 10) to bring awareness to community through advertisements and community events. Cinco de Mayo events in nearby communities were used to get information out. Decontamination equipment, trailers and other visuals were taken to the events and translators were hired to help. They also contracted with a day-care center to entertain kids with arts and crafts while CSEPP staff talked to the parents.

Presentation #3: Targeting Your Audience (Kay Ingle, Argonne National Laboratory)

Ms. Ingle presented the new CSEPP brochure developed by Argonne National Laboratory. This 12-page, four-color brochure provides an overview and benefits of the CSEP Program, and includes three pages of contacts. The brochure is designed with a pocket in the back for inserts to be selected by the public affairs officer. Fact sheets are being developed on a variety of subjects such as shelter-in-place, evacuation, detailed information on the types of agents, etc. Also, Ms. Ingle explained how this brochure can be used with existing materials. A timeline for delivery was discussed.

Parts of three new CSEPP videos produced by Argonne National Laboratory were shown to the conference participants. The videos were: Effective Presentations; Principles of Web Site Design; and Attaining Peak Performance in Public Affairs. Fifty conference participants signed up for copies of other CSEPP videos.

Ms. Ingle stressed the need to be creative in reaching our target audience because funds are not unlimited. We need to look at the tools we have now and how we can use them differently and more creatively. Also, we need to look at the groups within the groups that we are trying to reach. What are their interests? Who do they listen to? Where do they go? We can be more effective in using the media to reach people with our messages.

Presentation #4: Measuring Public Awareness (Barbara Cochran, Innovative Emergency Management)

Ms. Cochran presented information on how to measure public awareness. To measure something abstract, it must be defined in terms of the concrete (operational definition - this is how we’re going to measure something). Ms. Cochran discussed several ways to measure awareness:

- Direct observation of behavior.
- Indirect observation (e.g. through public documents like newspapers)
- Survey.

Ms. Cochran handed out a reference document on statistics and surveys, “Measuring Public Awareness: A Quick Reference Guide.”

Presentation #5: Designing Multimedia Presentations (Nicole Smith, Innovative Emergency Management)

Ms. Smith conducted a hands-on presentation on integrating multimedia elements into a Microsoft PowerPoint presentation. Participants used computers to practice various PowerPoint functions. Ms. Smith handed out a reference document, “Designing Multimedia Presentations: A Quick Reference Guide.”

2 OPENING PLENARY SESSION

The opening plenary session was held on the morning of Wednesday, July 19. It began with a ceremony by the State of Arkansas Color Guard and included welcoming speeches from a number of local officials and CSEP Program executives. The second half of the plenary session was devoted to presentations about the four pre-conference meetings.

2.1 Welcome and Opening Remarks

The conference began with welcoming remarks by William Harper, Director, Arkansas Office of Emergency Management; Patrick Henry Hayes, Mayor of North Little Rock, Arkansas; and Raymond Young, FEMA Region VI Director.

Russell Salter (FEMA, Director of Chemical and Radiological Preparedness Division) then thanked the conference planning committee, welcomed the conference participants, and stated that the conference is an opportunity to communicate with each other. Public safety is the overarching goal of the program. The Government Performance and Results Act (GPRA) will have a new impact on this program in the future. We need to state our goals and objectives in measurable terms, plot the course of where we are going, and state our results and outcomes. Integration presents an opportunity to take advantage of the interrelationships within the program. The four breakouts from yesterday will be reported to you today and at the end of the conference we will revisit them.

Denzel Fisher (ODASA, ESOH) welcomed the participants and introduced MG Doesburg.

MG John Doesburg (CG SBCCOM) emphasized that the Service Response Force (SRF) is part of the Department of Defense (DOD) which can pull together the continental United States (CONUS) assets from any branch of service. Under the Federal Response Plan (FRP), the SRF Commander also can pull in assets from other agencies. Over the years, he has been exercising specific parts of the SRF; this year the Bluegrass exercise will involve a large part of the SRF. Operation Safe Removal showed a need to bring more targeted assistance in emergencies so we developed a split-based and reach-back services approach. SRF has an eight-hour response time for the CONUS. We have a two-phase approach: the first phase is a select crew of experts, and the second phase is matrix support for the particular situation. One of our specialized assets is the DCS system which consists of 250 cell phones. Expectations for the SRF participation in the Bluegrass exercise are a smooth transition, and value added.

MG Doesburg then announced that an interagency team of CSEPP officials and support personnel had received the AMC Year 2000 Command Counsel Team Project Award for their efforts in developing a guidance document and holding a workshop on CSEPP-related interagency agreements. He distributed award certificates and Commanders Coins to those members of the team attending the conference: Kari Sagers, Elaine Chan, Don Brodersen, Ken Lerner, Dave Holm, Robert Sharp, Mary Beth Vasco, George Yantosik, and Paul Roberts. Team members receiving the award but not attending the conference were: Doralee Speakman, Les Mason, Bill Nicholson, Karen Cleveland, Ronnie Gross, Lisa Simon, and Mitch Vogel.

James L. Bacon, Program Manager for Chemical Demilitarization (PMCD) welcomed the participants to Arkansas and explained that PMCD is a tenant of MG Doesburg and the custodian of \$15 billion in programs. He reviewed the status of chemical demilitarization at each site. PMCD's goal is to eliminate public risk and lower storage costs. He gave a brief review of the May DCD event. He indicated a need to improve procedures, modify some equipment, and continue training on emergency notification procedures. PMCD anticipates resuming full-scale operations by August. He also briefly reviewed the non-stockpile program including assistance to the Russian demil program. Future challenges to PMCD include: (1) maintaining program momentum; (2) keeping prepared; (3) impact aid; (4) schedules and response readiness; (5) decommissioning of the facilities and secondary wastes; (6) leaving a safe clean legacy; and (7) personnel retention (6000-7000 employees). PMCD will meet the 2007 deadlines as we transition to multiple facilities.

Kay Goss (Associate Director, FEMA Preparedness, Training and Exercises) forwarded greetings from President Clinton and FEMA Director Witt. She acknowledged the individuals at the head table and thanked them for their professionalism. This is a good opportunity for all of us to exchange information and improve on our skills. The Capabilities Assessment for Readiness (CAR) Program is documenting for the President and Congress how we are doing in CSEPP and REP states. You are all doing great work raising the standard, and we will accomplish this mission. Results-oriented performance measures are now being developed and implemented. This will better protect the public.

The agency has improved efforts to reach out to minorities and other disenfranchised groups with efforts such as the FEMA Native American programs. Preparedness involves a continuous cycle of planning, exercising, identifying shortfalls and starting the cycle again. Ms. Goss also reviewed the status of emergency management degree programs for undergraduate and graduate students and in the public schools.

Lessons learned here in CSEPP are being applied to other areas such as FEMA's anti-terrorism programs and a new nationwide initiative (CHARCAP) begun in Region 6 by Gary Jones. SLOG 101, the new planning book on terrorism has incorporated some material from the CSEP Program. Thanks for the job well done.

Lastly Ms. Goss made a presentation to Leo Coonradt for his years of service at the Utah Department of Comprehensive Emergency Management (CEM) and wished him a great retirement.

2.2 Summaries of Pre-Conference Sessions

Summaries of the four pre-conference topical sessions were provided by the session leaders. [Note: in addition to the summaries reported below, for information about the pre-conference sessions, see Section 1 above.]

Presentation #1: ETO Meeting (Bob Norville and Ron Barker, FEMA HQ)

Exercise topics discussed during the pre-conference meeting included: exercising of reentry and recovery; need for guidance on sheltering and release from shelter-in-place (issue passed to planning group); and training on the automation systems, Emergency Management Information System (EMIS) and Federal Emergency Management Information System (FEMIS) (issue passed to automation group). The upcoming pilot tests of the Integrated Performance Evaluation (IPE) method were discussed. DCD and Pine Bluff will pilot the new evaluation and develop a new evaluators course. Program training status was summarized: currently there are over 25 courses available and over 26,000 people have been trained. The training program is moving towards a skills maintenance mode. The real measure of training is job performance in exercises and real emergencies.

Presentation #2: Medical Meeting (Lisa Hammond, FEMA Region VI)

The medical group sent out a survey to determine medical community interests with regard to topics and speakers. The survey responses were used to organize the pre-conference meeting and conference breakout sessions. The 41 issues identified were categorized into 10 areas, sent to the medical emergency management coordinators, and prioritized by them. The top four of these 10 areas were used as main discussion subjects for specific conference breakout sessions. The pre-conference session included presentations on: the role of medical administration in supporting emergency preparedness programs and measuring performance; CSEPP-specific hospital and emergency medical service (EMS) training; and use of a hospital incident command system. The break-out sessions will cover triage, decontamination, toxicological treatment, and administrative support.

Presentation #3: Planning and Program Integration Meeting (Joe Herring, FEMA HQ, and Dennis Legel, SBCCOM)

The group discussed the importance of integration between depot and county planning. The option of a planning IPT was discussed but the consensus was it is not necessary. There were presentations on performance measures, planning and program management, off-post notification, agent toxicity standards, sheltering in place, and the response to the Cerro Grande (Los Alamos) fire. Issues discussed included off-post notification, integrating PARs and PADs, release of areas sheltered-in-place, mass screening and decon, evacuation vs. sheltering, reentry to the depot, reentry to off-post evacuated areas, integration of CSEPP with non-stockpile plans, sharing of information and best practices, training of new staff, false activations, reentry/restoration, and tone-alert radios.

Presentation #4: Public Awareness Meeting (Steve Horwitz, FEMA HQ, & Cheryl Humphrey, Umatilla County)

The pre-conference session included presentations on performance measurement, the Umatilla media campaign, targeting your audience, measuring public awareness, and designing multimedia presentations.

A new public affairs IPT will meet in September. The central objective is to increase the public's awareness of what to do when they hear a siren. It is important to develop timely and creative products. Tools are being developed to measure the effectiveness of existing programs. Shelter-in-place is a big issue.

New products have been developed as part of a six-month public awareness program at Umatilla.

3 BREAKOUT SESSIONS

A total of 25 breakout sessions were held on July 19 and 20, covering 12 topics (most topics had multiple sessions). Following are summaries of the presentations and discussion in the breakout sessions. For the convenience of the reader, in general all sessions on each topic have been combined into one summary. However, for some topics (planning and medical), the sessions were substantially different from one another and thus are summarized separately.

3.1 Automation

Presentation #1: Darius Kwiedorowicz, SBCCOM

Mr. Kwiedorowicz welcomed everyone to the automation breakout session and stated that the emphasis of the session would be to discuss the Automation User's Group and how they used the Persona Technique to develop their issues.

Mr. Kwiedorowicz gave a short presentation on how the user group has employed the persona technique to develop typical users for the system and keep personal bias out of the process. Six personas were created to represent a composite cross section of the user community. The presentation was turned over to Blanche Wood of Pacific Northwest National Laboratory (PNNL) and other PNNL personnel to give a demonstration of how the persona technique is used. They presented three short scenarios as examples:

- C Creating specific user desktops.
- C Hazard analysis and information sharing.
- C Use of FEMIS for other hazards.

Presentation #2: Don Broughton, Madison County, KY EMA

Don Broughton of Madison County, KY Emergency Management Agency (EMA) gave a presentation on how the users group used the persona technique to develop training issues for the automation system. This presentation was only a summary of the work. The complete presentation can be found at <http://cssepug.pnl.gov/>. A user name and password, obtained from PNNL, is required.

Presentation #3: Joe Fletcher, Utah CEM, and Jim Carson, DCD

Joe Fletcher of Utah CEM and Jim Carson, Deseret Chemical Depot, gave a presentation on how the Users Group went about identifying user needs and user interface issues for the automation system. Once this was accomplished, they talked about how these requirements were conveyed to the software developer for incorporation into the next software release.

Q & A:

Q: What software is used to develop FEMIS user interface?

A: Visual Basic and some C++ have been used. As newer techniques become available, they are looked at.

Q: You spoke of running a CSEPP event and a non CSEPP event simultaneously, can they both be open at the same time.

A: Yes

Q: I have heard that D2 Puff has been approved. Is this true?

A: Yes, and it is being currently fielded as a stand-alone system.

Q: Have the CSEPP system administrator and CSEPP user training tracks been laid out? What about the commercial off-the-shelf training tracks?

A: They are being looked at and developed. We need to still revisit this issue.

Q: What is the status of the FEMIS decision?

A: Mr. Kwiedorowicz showed a copy of the IPT recommendation slide and explained the process in terms of selecting a single system with a decision forthcoming in October 2000.

Q: Can polygons in FEMIS only be drawn or can you define them by entering coordinates of points?

A: Sort of. As you draw the polygon, the coordinates are displayed on the screen in a window.

Q: As a Federal responder, do I have access to the information being displayed?

A: Yes, if you have the software installed on your computer and agreements with the depot to view and share information and you are connected to its system.

Q: The State Directors took a stand that the system should move towards a web based technology.

A: Mr. Kwiedorowicz stated that the Army is not pursuing this path for two reasons, money and current DOD policies regarding requirements for security on web based critical systems.

Q: Who is paying for the development of more all-hazard capabilities?

A: Mr. Kwiedorowicz replied that this has not been determined, but CSEPP is not paying the bill. This ties into the legacy question of support for the system after CSEPP goes away.

Q: What is the status of the computer based training?

A: The 1.4.7 training CD will be available at the training at ACA in August. The 1.4.6 version is on the web site at SBCCOM.

Q: Who is actually using FEMIS now.

A: The most use is in the State of Oregon. The state of Alabama is also using it.

Q: Is the use on-post, off-post, both?

A: Mostly off-post.

3.2 Cooperative Agreement (CA) Guidance

Presentation #1: Lisa Craven Darlington, FEMA

Ms. Craven Darlington gave a presentation on the CSEPP Cooperative Agreement (CA) for FY 2001 and the Government Performance and Results Act (GPRA). Through GPRA, FEMA is moving to a performance-based system that will support better budgeting decisions and make it easier to justify funding decisions to the GAO and Congress. The CSEP Program will implement GPRA through national performance benchmarks.

When FEMA's responsibilities were separated from those of CSEPP, a financial management process had to be established for FEMA to support better budgeting. In developing this new guidance, a performance-based system was necessary under 1993 Act that focused on results, instead of process. Under GPRA, the results have to improve operations and be able to justify funding at congressional hearings, as well as to the U.S. General Accounting Office (GAO), Office of Management and Budget (OMB), and DOD. FEMA has to show not only that the funding was allocated, but how it was spent and what were the results. It will take 2-3 years to smooth out the system's implementation problems. A CSEPP transition seminar was held June 13-15, 2000 at Emmitsburg to disseminate budgeting information. It is not easy and will be a long process.

CA preparation instructions are being developed to cover: submitting a CSEPP application; regional office instructions for awarding CSEPP CAs, instructions for outlays and performance reporting; and audits. The new guidance and process are more detailed than was initially thought or foreseen. A new package is expected sometime in August 2000.

Many aspects of the process are unchanged. The major areas of change are that state budget proposals will be submitted in a new benchmark format according to the 12 CSEPP National Benchmarks; the proposal narrative will integrate benchmarks, workplans and expected outcomes; and performance reports will be submitted quarterly. Modules are called applications and there are six parts to a CA application. On the budget form, there is a column for each of the 12 CSEPP national performance benchmarks. There are columns to keep the Operation & Maintenance and Procurement items separate.

FEMA is now ready to do the Performance Guidance, FY01. The performance guidance document will contain the following information: an overview, GPRA, future direction, funding appropriations, performance extensions, fund restrictions, life cycle cost estimates, state obligation and spending plans, end-of-year highlights letter, and schedule. The tentative schedule for making FY01 awards and the beginning of the CA Performance Period is 10/1/00. The first quarterly report is due 1/29/01.

Technical assistance is available for grants management and other areas to make this easier. FY2001 is the first year of transition, FEMA is trying to make the whole process better. There will be a training session in April 2001 at which time FEMA will seek feedback on the new budget guidelines.

ANL and IEM are developing automated tools to assist with preparation of CA documents. Jack Long of IEM and Jon Zadra of ANL will present these tools.

Presentation #2: Jack Long, IEM

Mr. Long discussed the Automated Narrative Statement Tool that IEM is developing, and demonstrated a beta version. The system will be provided as an optional tool to ease production of narrative statements. The software allows users to choose the relevant benchmarks and performance standards from dropdown menus and then type in the task description and expected outcome for each task. Tasks associated with performance measures will automatically fill in the performance measure as the expected outcome. Regions have been provided copies to review and comment on. A demonstration of the medical benchmark and performance measure was shown for MED1.

Q & A for Presentation #2:

Q: Can you list more than one measure at a time?

A: No, you can do only the most appropriate, but you might put in a note.

Q: Since there is a narrative requirement, as well this year, isn't this redundant?

A: Next year it might not be redundant. This year it is, so cut and paste. If it replaces the workplan that would be a great goal.

Q: Under the four categories, are those broken down into specifics so the counties and states will be sure they get everything that they need to under each category?

A: Once the performance indicators are finalized, there will be a guidance document and technical assistance. Probably late fall there will be further information.

Q: Do all line items fall under these categories?

A: No, they cannot all fit under performance indicators.

Presentation #3: Jon Zadra, ANL

Mr. Zadra stated that modifications to the CSEPP Database Module were being made to conform to the CSEPP CA FY01 instructions. These changes are reflected in a draft revision of the Worksheet Guidelines that were originally formulated by the Financial IPT in 1996. The Worksheet Guidelines had three sorting mechanisms that were used to track the budget line items. The states required tracking of functions, OMB required tracking of objective classes, and FEMA required tracking of CSEPP classes. The CSEPP classes came from the original CSEPP

benchmarks and more were added. In the FY 01 CSEPP CA, the CSEPP classes will be changed to CSEPP National Benchmarks and some CSEPP classes will be consolidated.

Other changes have included eliminating the mitigation/risk reduction & preparedness/operational readiness categories. FEMA Form 20-22 has been eliminated. The State Summary and Forecast Worksheet Report have been deleted. FEMA Form 20-20 will report both State requests and FEMA awarded funding amounts. Work is underway on Version 4.0. It will automatically convert all CSEPP classes into national benchmarks.

Q & A for Presentation #3:

Q: Can you have more than one copy at a time?

A: No, you need to have only one.

Presentation #4: Charles McNulty, FEMA Office of Financial Management

Mr. McNulty stated that FEMA wants to be able to track each line item. They want to be able to track over to the outlays and then be able to follow through the whole system. OMB has been putting out numerous dictates for increased automation, so CSEPP and FEMA are doing their best to comply. The automation will take 3-5 years. Congressional audits and the benchmarks are driving the automation effort. FEMA needs the right words to talk with Congress and to be able to provide information involving a series of years of fund disbursements, assets, dispositions, and inventories. This will be critical for closeout in the future.

Q & A for Presentation #4:

Q: Year 2000 money is good for 2 years, but the state only has one year?

A: Performance period starts October 1, so an extension is often needed. The Feds can make the money retroactive to pay back the states for money already spent. States and counties need grant training, there is too much misinformation and ignorance about the process and procedures.

Q: Are the Feds obligated to pay back states and counties for money spent in anticipation of receiving Federal funds?

A: Yes, if they have some paper saying funding will be forthcoming. The Fed has 3 years to obligate procurement money. States have a one-year window, starting October 1, but can get an extension.

Q: Why not go with the 13 functions, rather the 12?

A: This is being discussed and under consideration by the state directors. Several measures are out there for training, exercises, and financial. The National Emergency Management Association is using the 13 functions in its certification program.

Q: Are quarterly reports made up by states?

A: You can follow FEMA guidance; the financial ones are fixed.

Q: Will there be training related to the Cooperative Agreement?

A: Not sure if the training will be done in the field or if people will be brought to Emmitsburg.

General Q & A:

Dave Holm of Colorado OEM asked whether the FEMA CSEPP staff workplans, performance measures and goals will be available to states and counties. He indicated this had been promised at a State Directors meeting. Ms. Craven Darlington indicated she will follow up on this issue.

George Krock of Maryland mentioned that the program now has several different lists of performance criteria for states: the 13 management functions used in the capability assessment for readiness program, the 12 national benchmarks used for budgeting, the four CSEPP GPRA national performance benchmarks, and the standardized exercise objectives. He requested that the program try to integrate these into one set of criteria.

Dave Holm questioned whether CSEPP CAs could use a two- or three-year performance period when Congress has appropriated two or three years' funding; this would save paperwork for both FEMA and states versus having to file repeated period extensions. Ms. Craven Darlington indicated that this might not be possible since the appropriated funds may not be available to FEMA to disburse all at once.

Dave Holm stated that the state directors would prefer one reporting system for all emergency management programs, rather than separate systems for each program. He also suggested that the various reports be allowed to reference one another, to highlight the side benefits that occur across programs.

3.3 Exercise and Training

Presentation #1: Update on Training (Bob Norville, FEMA HQ)

Mr. Norville provided a brief update on training and the pre-conference ETO meeting. CSEPP training is at a stage where we are moving towards a level of maintenance / sustaining. The training needs assessment has been completed and courses have been developed. CSEPP courses are now available on: orientation/operations, self/casualty care, planning, protective action decision making, public affairs, and communications. Training can be downloaded from two websites. The training matrix (a functional area crosswalk) was made available for the attendees. Some of the courses have been developed by states.

The exercise reports can indicate where training is needed. It is often the first place to be looked at to find training needs. The training program is looking at the program integration actions to determine if additional training is needed. CSEPP training is tied to both individual performance and overall performance within the CSEPP exercise.

The goal for 2001 is to identify, access, manage, and coordinate training resources.

Q & A for presentation #1:

Carl White, Newport Chemical Depot: Who is to assure that training has been given? The state should ensure that training is given, if training is the actual need.

Henry Hoffman, AMC Surety: Issue - Army requirement that the Immediate Response Force (IRF) Commander is the Federal On-Scene Coordinator (OSC) for an incident. Is the need for training for OSC a CSEPP issue? Henry believes it is. No standardized course exists. DAC has developed a specific course. Request that this type of course be developed as a National CSEPP Policy decision.

Dave Galgani, SBCCOM Liaison to FEMA HQ: I will take up the request and report back.

Bob Norville: How are we determining if the training is effective?

Joe Bell, State of Indiana: Tests after the course and exercise assessments are being done, but we don't have the ability to go ask the "boss" how the person trained is doing. Even after exercises have been conducted, training needs might not come to the forefront.

Gary Epperson, Clark County, KY: Exercise and practice are opportunities to further the training.

Larry Keen, FEMA Region X: CAIRA exercises are other opportunities for off-post communities to practice and reinforce their training.

Henry Hoffman: Army recommends that the communities be given opportunities to participate in CAIRA exercises at least twice a year (one CSEPP and one other CAIRA).

Barbara Parsley, Deseret Chemical Depot: Real events are also opportunities for practicing and enhancing training.

Louise Grant, Lexington-Fayette Urban County Government: Is there a point in time when a new CSEPPER needs to have completed training?

Lorin Larsen, Utah CEM: Utah is working with agencies identifying who needs to be trained and works to provide required training.

Deroy Holt, FEMA Region VIII: If we move forward to a capability assessment, then you have a document which has a training assessment and identified areas where training is needed and that plugs into the budget.

Frank Rainey, Anniston Chemical Activity: Perhaps CSEPPers can be asked to demonstrate their ability outside of exercises.

Brenda McCurry, Cleveland County EMA: It's the responsibility of the county coordinator to maintain training records and make sure personnel are trained and that the county judge, the person responsible overall for activities in the county, is familiar with staff capabilities.

Dave Galgani: Training must be sustained through practice.

Question posed to the audience: Where does training need to go? Have we developed the system to determine if training is successful? Is there a need for shelter-in-place training? Shelter in place is both a public affairs and training issue.

Dennis Lindsey, NCD: Has the program considered training for the general public?

Jennifer Gordon, AR PIO: Specific training for shelter-in-place might be useful.

Doug Davis, PCD: The U.S. Army Center for Health Promotion and Preventive Medicine (USACHPPM) provided training to PCD - the course was very good.

Jim Hackett, NCD: Risk management used to be trained but is no longer on the list. Request that it be continued and added to the list.

Gary Epperson: Training before an exercise could lead to enhanced performance, whereas training and no practice after an exercise might lead to lower performance.

Colbert, Madison Co., KY: Is there a way to evaluate the instruction and training?

Becky Edwards, State of Arkansas: AR has developed training guidelines to track training needs for initial and refresher training. Utah was putting CSEPP training in with the hazardous material worker operations (HAZWOPER) training. AR requested that it be permitted to do the same. A suggestion from Session 1 recommended that training be evaluated by performance in real events.

Jim Aldridge, AL EMA: Alabama has training on demand. Due to turnover, refresher training is nearly impossible. Alabama continues on an annual basis to provide training to any person who needs it, not refresher. The only way to really evaluate training is during the exercise when the personnel perform their duties.

Bill Smith, State of Maryland: The training received is a function of your position. MD combines REP/CSEPP/HAZMAT training to personnel. Performance is not always evaluated except when emergency responders return alive from their jobs.

Lenore Pointer, Morrow Co., OR: We received requests from businesses for shelter-in-place (SIP) training and explanations of the principle of SIP. Explaining to safety committees how to do SIP without additional resources is challenging. She wants to have training for herself to ensure she provides the best information.

Bob Norville: Job aides are available, he believes, which is a step-by-step process on SIP.

Mike Myirski, SBCCOM: Madison Co. brought a video to the conference on how to do SIP.

Bill Smith: With the number of chemical plants around Baltimore, the companies have developed informational videos to show people how to and what to do for SIP.

Terri Hobbs, FEMA HQ: The Unocal video is a good video.

Kathy Coleman, ACA: We had a video done for ACA for their own personnel. ACA has a large industrial population and this video provides information for them on SIP.

Dave Galgani: Army training is developed and provided by DAC, for automation and other functional areas. Training can be given to both on- and off-post personnel at the same time.

John Turnauckas, DAC: FEMIS training is going to be delivered in August at ACA. DAC expects to have a FEMIS manual/user guide just like the EMIS one. A lot of courses do not have refresher training, but DAC will come out to give “refresher” training to persons who request it if trainers are available. Mobile training setup can handle computer training for 15 people.

Bill Smith: Is there Army training for on-post employees and families that live on post?

Presentation #2: Exercise Program Update (Ron Barker, FEMA HQ and Lorin Larsen, State of Utah CEM)

The Exercise Integrated Process Team (EXIPT) has recommended that the program go in a new direction in the evaluation of exercises: Integrated Performance Evaluation (IPE). The pilot will be held in September at DCD. The follow-on pilot is planned for February 2001 at PBA.

Over the life of the program it has been noted that exercise evaluation could be improved. The EXIPT has worked over the past three years to attempt, in a step-by-step methodology, to improve the exercise program and the evaluation process.

The new format was developed by the EXIPT. We are going to find out how well it works in September. Two stand-alone exercises were conducted at DCD last year. The capability review excerpt from the DCD 99 report (page 2) was shown. The capability review is a reflection of the community’s self assessment of its capability and readiness against the CSEPP benchmarks and objectives. A CSEPP policy paper is being developed which will implement the capability review concept into the program.

The IPE is a “big picture” look at what the community does in an exercise. The IPE improves on the CSEPP objectives. The IPE does not concentrate on the individual actions, but permits the exercise evaluation to look at the results in an integrated fashion. The IPE results in an outcome or performance-based evaluation, not a process based one. The IPE will result in a “team” approach to the evaluation, where evaluators work in concert to observe and gather data, then after the exercise they perform the analysis and write the report.

One of the tools that Utah used was the Synchronization Matrix to assist in the process. It was used to identify shortcomings and interjurisdictional integration activities in plans. Response operating systems or “streams” are umbrellas for organizing functions and activities.

The exercise evaluator training course is being developed/modified to ensure evaluators are trained in the IPE methodology. The first offering of this training will be in August 2000 in Pueblo CO.

Q & A for presentation #2:

Q: When will training be provided to evaluators?

A: In August at Pueblo, Colorado. Additional training will be provided in November in Utah. The course modifies previous evaluator courses to incorporate the new methodology. The difference in the exercise program is focused on the evaluators and the “culture,” not the players.

Q: Alan Jacobitz, Washington EMA: Are all “old” evaluators required to take the new course. If our exercise is in May, will we be using this during our exercise?

A: Evaluator training is only needed if the new approach is adopted. The process of adopting the new methodology will take some time. This will not be immediate.

Q: Is there a training program/course for scenario development for locals?

A: No.

Q: Steve DeBow, Washington EMA: Is there a mechanism for tracking time of players actions? Recommendation to have that be included.

A: Yes it will be captured.

Q: Paul Leycamm, SBCCOM: How will players be integrated into the evaluation process? During last year’s pilot the Tooele County Director was available to the pilot evaluation team to clarify actions.

A: Doug Davis, PCD: Once the exercise was done, the evaluation teams would get together and discuss the time frames. The program has lost that. Suggest that this process be included in the future.

Q: John Gray, SBCCOM: What’s the long term plan for training all of the evaluator pool? What is the requirement of evaluators for extended time needed to do this evaluation.

A: Training will be provided as the program implements this (if it’s implemented). The time will be extended for some evaluators. The major time requirement is on the evaluation team leaders.

3.4 Medical

There were four medical breakout sessions during the conference. Each session was led by LTC (Dr.) Mukai of SBCCOM and Lisa Hammond of FEMA. Each session addressed a different CSEPP-related medical topic. Therefore each session is summarized separately below.

Medical Breakout Session I – Triage Protocols

Dan Bird facilitated this session.

Presentation #1: Chemical Triage (Jim Cody, Pueblo County Health Dept. and Dr. Richard Alcorta, Maryland Institute for Emergency Medical Services Systems)

Mr. Cody and Dr. Alcorta described the responsibilities of the triage officer and focused on how triage is conducted in their respective states. In both states there is a medical coordinator in the state emergency operations center (EOC) to assist in getting medical supplies to the scene. They stressed the need for a multi-level triage system for use in the field, at treatment centers, and at specialty centers. The categories used to establish the priority of treatment were described. They are based on evaluation of the severity of effects seen in patients. Mr. Cody expressed the need to standardize triage tags and the need for a universal tracking system. He stated that in Colorado, hospitals will not accept patients who have not been identified as being decontaminated. He then described the physical layout of the casualty receiving area and provided an example of how triage is conducted. Both stressed the need for all hospitals to be prepared for decontamination in any chemical incident because there will always be people who by-pass traffic control points and proceed directly to hospitals for treatment. The Simple Triage and Rapid Treatment (START) system used throughout the states was presented in detail.

Presentation #2: Use of the START system (Mike Feddes, SAIC)

Mr. Feddes endorsed use of the START system to facilitate the making of objective decisions regarding patient treatment.

Presentation #3: Performance Measures (Dr. Richard Alcorta)

Dr. Alcorta discussed the components of a quality improvement program used in Maryland and the role of performance measures in that process. One goal in Maryland is to evaluate how effectively triage is being conducted. He outlined the steps used in evaluating emergency situations. By observing indicators and monitoring, they can determine if the job is being done effectively. He stressed that the improvement process concept needs buy-in at every level.

Group Discussion:

The facilitator then started the group discussion portion of the session by requesting comments about some of the issues that were raised on the pre-conference questionnaires. It was recommended that a medical IPT be established. The following questions were raised:

Q: Are there any legal aspects to consider for individuals working outside their specific areas of expertise during an emergency?

A: Each institution has its own idea of what should be done in an emergency situation. Response must be done on the basis of what the individual institution wants and can do. If a non-medical person becomes involved with triage that is a different problem.

Q: How do you handle psychogenic patients?

A: One state provides each individual that arrives for treatment a fact sheet to take home for reference. It explains what symptoms to look for and what to do if those symptoms are experienced.

Q: Where is it written that decontamination must be completed in 20 minutes during exercises?

A: It is not written anywhere that anyone in attendance has seen.

Comment: To assist with psychogenic patients the following were suggested: Get mental health people involved in planning and response to deal with these individuals. Maryland has identified people to be available at hospitals to assist. Recommend involving public social workers with the medical community. It is important to involve public affairs people in the process to provide accurate information on health effects and what to do. It was further suggested to break large numbers of psychogenic patients into small groups and assign them jobs to do while they are in a shelter.

Comment: Maryland uses the poison control center to pass information to the public. It is trying to include information on any chemical in the system. A listing of poison control centers throughout the U.S. can be found at this web site: <http://www.gapcc.org>. They can be contacted for information. When asked about the use of 911 centers to distribute information, one state says it refers the call to the poison control center for details. In addition, information can be obtained from the Domestic Preparedness Hotline: 800-424-8802 or the SBCCOM Emergency line.

Medical Breakout Session II – Decontamination

Lisa Hammond welcomed the participants, emphasizing that this is their conference and their input is encouraged and required for the conference to be successful. Dr. Mukai reviewed the organizational history of the conference and stressed that one of the goals was improved interactivity among the participants. Ken Hudson was the facilitator.

Presentation #1: Performance Measures (Deborah Kim, University of Utah Hospital, and Sharon Wilcoxson, Parkview Medical Center, Pueblo)

Ms. Kim and Ms. Wilcoxson reviewed their approach to use of performance measures including the FOCUS PDCA method presented in the pre-conference meeting. (See previous discussion in Section 1.2, p. 4 above.)

They concluded that performance measures are one step in their larger process of improvement. They asked the audience to consider using this approach in their individual organizations to help with improving performance.

Presentation #2: Decontamination (Steve Myren, Oregon Health Division)

Mr. Myren presented an overview of how decontamination activities are being conducted in the pre-hospital, buddy decontamination, and hospital environments. Oregon has four trailers with tow units that have been customized by the fire service organizations to which they are assigned. He described the technical makeup of the vehicles, the physical arrangement at the decon scene, and the set-up process which usually takes 16 minutes. Submission of people to decon is voluntary. There is no law enforcement support for the fire service. Signs are in English and Spanish because of the large Spanish-speaking population. A blue wristband is used to indicate that an individual has been decontaminated. Oregon is starting to discuss the subject of extracting people after the plume has passed their area. Their responders are using British Battle Dress Overgarments (BDOs) because they still provide protection after being exposed to water. It was also noted that in Oregon, bleach is used for field decon but soap and water is used in hospitals. He then discussed the use of ICAMS. A positive feature is that the equipment is portable. The drawback is that they are slow in surveying an area and there have been some problems getting readings.

Presentation #3: Overview of CSEPP Decontamination in Utah (Lloyd Baker, Utah Dept. of Health)

Mr. Baker described the Utah three-tiered decon approach: (1) at TCPs close to the depot; (2) at the one TCP near Salt Lake City; and (3) at the 10 hospitals in the surrounding communities. Utah uses soap and water for decon because of the risks associated with bleach. Blue wristbands are used to show that the individual has been decontaminated. They have established triage areas to provide decon, medical support and psychological help. Each of the 10 hospitals in the three surrounding counties is fully equipped with PPE and decon equipment. They are concerned that the concept of mass decontamination is unrealistic when considering the time needed to do the process. They are using a “dry decon” process (no showers – only washing of the face and exposed areas) to decon large numbers of people faster because people can do it for themselves and it does not require special equipment. Lessons they have learned include: (1) do not use bleach; (2) medical and security people should not perform decon because of their other duties (i.e. use other people); and (3) you are on your own and can’t depend on early arrival of external support. He stressed the need to use OSHA guidance documents. Utah uses its poison control center to provide health-related information to the public. It is concerned about the possible impact of terrorist events associated with the coming Olympics. The State supports the need for establishing pediatric dosages for infants and availability of pediatric auto-injectors. Three open areas are: (1) the need for pediatric auto-injector kits; (2) how to determine if people are clean after decontamination; and (3) what to do with and who takes care of runoff from the decontamination process.

Presentation #4: Army Decontamination Procedures (Dr. (COL) Charles G. Hurst, USAMRICD)

Dr. Hurst pointed out that the states are better prepared than the Army is to perform decontamination in a civilian emergency. He then described the history of the evolution of the decon process. He emphasized that early physical removal of possibly contaminated garments is the most important thing to do. He stressed that 99% of the people do not need decon. Decon does not work instantly to remove the agent, particularly mustard. He reviewed the 1980s Dutch decon studies on animals that show that a variety of materials will decontaminate effectively.

Group Discussion:

Q: Are there studies to show if bleach enhances the absorption of mustard agent?

A: Yes. Dr. Hurst showed results of a 1950s study that show that concentrated bleach opens the pores and increases absorption. The recommendation is to use soap and water.

Q: To what extent is off-gassing from body contamination a problem?

A: It can occur, but Dr. Hurst knew of no instances where off-gassing caused permanent problems.

Q: How do you decon wounds?

A. Do not decon wounds. Use normal surgical cleaning procedures (saline) to flush the wound.

Q: What is the best practice for liquid decontamination?

A: At present, Army doctrine is to use 0.5% bleach on skin. Dr. Hurst prefers large amounts of soap and water as soon as possible.

Medical Breakout Session III – Toxicological Treatment

Dr. Roger McIntosh facilitated the session.

Presentation #1: Toxicological Treatment (Michael Parette, Arkansas Dept. of Health)

Mr. Parette discussed the treatment approach used in Arkansas. He reviewed the dosages used for adults, adolescents, and children depending on the signs and symptoms displayed by the patient. The dosages all varied depending on the situation. He stressed treating according to the effects observed. Start with aggressive treatment and adjust as needed. He then discussed what to look for that shows improvement in the patient's condition. Arkansas does not use powdered antidote, only vials of prepared solution. Auto-injectors are used but are not distributed. It was noted that anyone who goes through ACT FAST training can administer Mark-1 kits.

Presentation #2: Toxicological Modalities: the Alabama Perspective (Dr. Michael Proctor, Anniston Regional Medical Center)

Dr. Proctor discussed the approach used by Alabama medical staff. He stressed the fact that they are using extrapolated data for decisions because of the lack of hard data. They need to verify that their approach is correct. He then listed the concerns they have identified as challenges for the year 2000. Dr. Proctor stated that because there is no hard data on children, they have divided children into three age groups and use appropriate doses of atropine for each age group. A study utilizing various antidote levels was conducted by Israel during the Gulf War to determine the effects of various doses on the individual. The study showed it was safe to administer the appropriate dosage ranges to children. He then discussed potential alternatives to atropine, the possible use of alternatives that are not FDA approved, and what each state allows the EMS people to carry and administer. Dr. Proctor stressed the need to use common sense in treating patients.

Presentation #3: Use of Atropine (Dr. John Urbanetti, SAIC)

Dr. Urbanetti gave a review of the use of atropine, emphasizing that since the development of nerve agents there is a lot more information available. He reinforced the idea that while there are other drugs available that could do a better job of treatment, they are not used because of their side effects. Further, he mentioned that during all his research he could only identify 2 deaths since 1871 that could be attributed to atropine. In addition, he pointed out that the auto-injectors start working sooner than other methods of administration because of faster absorption rates. Dr. Urbanetti concluded his presentation with reference to the study conducted in Israel, which indicates that children present symptoms differently than do adults.

Group Discussion:

Dr. McIntosh, SAIC reviewed issues raised during the pre-conference survey and tried to get the session attendees to identify their best practices. Discussion followed on administration of antidote to children. He asked the states to indicate what dosage they would use for pediatric patients. Some states indicated they were using the 1996 Olympic protocols. Utah indicated it would like pediatric Mark 1 kits. It was suggested that the likelihood of getting FDA approval for a pediatric auto-injector is slight. It was mentioned that the need could be from a terrorist rather than a CSEPP incident, thereby adding rationale for getting FDA approval of pediatric auto-injectors. The simpler and faster approach would be to use established pediatric treatment protocols. Discussion followed on what EMS personnel are allowed to do. Concern was also expressed about not having enough people to treat the numbers of people who might need medical treatment.

Medical Breakout Session IV – Administrative Support and Stakeholders

Dr. Roger McIntosh facilitated the session.

Presentation #1: Debbie Kim, University of Utah

Ms. Kim discussed the hospital component of Utah's hazardous material program that started in 1990 with the introduction of CSEPP. Utah is further enhancing its medical preparations program for the 2002 Olympics. That effort is complicated by the following problems: (1) reduction in funding that caused loss of personnel; (2) keeping open with power to operate during power outages; (3) loss of staff through competition; and (4) moving people to hospitals through the massive amount of construction going on in the city.

She also discussed the impact, problems, and ongoing and future actions Utah faces as a result of the recent release incident at the Deseret chemical disposal facility. Those problems include (1) general confusion; (2) no warning of arriving patients; (3) communications; and (4) command and control. She raised the following questions related to introduction of performance measures: (1) Who does the measuring? (2) Who is qualified to measure what? (3) Where does it get reported? and (4) Why measure something that isn't being done? She then discussed the impact of Joint Commission on Accreditation of Healthcare Organizations (JCAHO) standards 1.4 (security), 1.5 (Hazardous Materials and Waste) and 1.6 (Emergency Preparedness) on hospital operations. She listed the areas being measured to implement improvements. Ms. Kim recommends looking at OSHA and JCAHO standards and the administrative tools they developed to determine capabilities. She concluded by stating that the role of hospitals is greater than just taking care of casualties.

Presentation #2: Dennis Hudson, Jefferson Regional Medical Center, AR

Mr. Hudson discussed how emergency preparedness planning works in a small hospital in Arkansas with limited resources. The issues are the same in hospitals of all sizes. He listed a number of typical weaknesses in healthcare emergency preparedness planning, including poorly documented events, lack of troubleshooting tools, and lack of alarm points to signal when critical supplies are running low. The primary issue is that hospitals often have not undergone a detailed review with local agencies. The solution is to gear the system needs to local issues. Goals should be locally obtainable. Mr. Hudson stressed the need for emergency planners to include hospitals in their planning process, particularly when identifying needed equipment. He then listed a number of obstacles to hospital participation in emergency preparedness planning: (1) competition among various factions in the community; (2) lack of competence due to staff turnover, limited training, and vague guidance; (3) limited funds; and (4) the need to track expenditures for reimbursement. He recommended the following "best practices" to use, particularly when resources are limited: (1) use a simple approach; (2) build response capability with existing resources, since additional support is a long way off; (3) use table-top exercises; (4) provide action templates/algorithms; (5) get administrative buy-in by highlighting the public relations value; and (6) get other departments and the community involved for technical support and mutual resources.

Presentation #3: Ms. Sharon Wilcoxson, Parkview Medical Center, Pueblo, CO

Ms. Wilcoxson provided some supplemental comments. She recommended involving other

members and staff inside and outside the hospital in the planning effort. She stressed the need to use every effort to motivate the hospital administrator and get his or her buy-in. She pointed out that there will be limitations such as lack of coordination, lack of input, and issues with private physicians. In concluding she emphasized the need to try hard to get everyone involved in the process.

Presentation #4: Dr. Roger McIntosh, SAIC

Dr. McIntosh reviewed the seven areas in the survey relating to administration and stakeholder consideration in an effort to identify best practices. It was suggested that one of the most important practices is to develop ways to motivate administrations. Suggestions regarding ways to do this included emphasizing that reimbursement is possible, there is value added by participation, the hospital will have a high-tech feel, and planning ahead for emergency preparedness. Capability can be improved by coordinating with other agencies and conducting exercises. Integration is essential. It is necessary to involve heads of departments and to get their buy-in; emphasize the value of public relations; work with the local emergency planning committee; and hold regular meetings with all stakeholders.

3.5 Planning

The Planning breakout session leaders were Joe Herring, FEMA and Dennis Legel, SBCCOM. The two planning breakout sessions involved different panels and addressed different topics; therefore they are summarized separately below.

Planning Breakout Session I

The panel for Session I included Marianne Rutishauser, Tooele County Emergency Management, Jim Miller, DCD, and Leo Coonradt, Guest Speaker, Former Deputy Emergency Management Director, UT CEM.

Presentation #1: Joe Herring, FEMA

Mr. Herring discussed whether there is a need for a planning group. At the pre-conference meeting the consensus was that electronic communication would be better than establishing a team that would have to meet. He also summarized the issues discussed at the pre-conference planning session including off-post notification; integrating PARs and PADs, release of sheltered people, mass screening and decon, re-entry onto Army installation and into previously evacuated areas offpost, integration of CSEPP and non-stockpile plans, and other planning issues.

Presentation #2: Leo Coonradt, Guest Speaker, Former Deputy Emergency Management Director, UT CEM

The May 8 incident at Deseret Chemical Depot (DCD) taught the off-post community to “use your gut instinct to react.” Once the incident was brought to light, Utah asked for representatives from DCD and local response agencies to attend a meeting the next day, 48 hours after the incident occurred. Everyone was very responsive. They looked at the plan, and were quick to call for the proper organizations to investigate. They notified the governor's office of both meeting findings and the request for an investigation. Mr. Coonradt felt that if that meeting had not happened, the consequences of the May 8th problem would have been worse; this way the media and the public knew actions were being taken, and investigations were being done. The media was informed. The public was kept apprised. This paid rich dividends. Everyone understood that there were truly actions being taken to find out what had happened and to correct any deficiencies that were found. Mr. Coonradt explained that there was little negative media coverage because prior to the incinerator going operational, the public was educated and media was involved in all planning operations.

After the May 8 incident, a public meeting was held to explain the results of the investigations. There were 40 government officials there to answer questions and only two members of the public. This showed what little concern the local public had about the incident. That doesn't mean that care isn't being taken now to maintain that public trust. The Utah CSEPP community has monthly meetings. The extensive media/public education campaign that was conducted in 1996 paved the way for better understanding by the public and local media for this accident.

It took six years in Tooele to determine that the community was prepared before burning could start. So everyone needs to start planning NOW.

Discussion:

Wayne Thomas, Oregon Department of Environmental Quality (DEQ): at Umatilla, 600 workers were evacuated due to a hazardous material incident. This caused problems because there was no communication initially with the media or the public. Now a governor's task force is investigating. The problem was there was no defined structure to communicate with the off-post community for a non-chemical accident. It is there now – the commander worked with the contractor to put a procedure in place.

Logan Weiler, Kentucky EMA: Must drill for everything. Need a matrix.

L. Coonradt: How to plan for one of these drills? Tie everything together. You should not make a distinction between on and off post.

W. Thomas: The public doesn't discriminate between the Army and the off-post. You should never withhold information.

J. Herring, FEMA HQ: Is this planning or program management?

L. Coonrad: The program should form an IPT for Program Management.

W.Thomas : Do all the jurisdictions have planners?

The group responded that most do, although many people do two jobs especially at the county level.

L. Weiler: Do all sites have local meetings just for planning? Most sites do. This may be why there is no desire to have an IPT.

Clark Combs, Kentucky: If planners are only partially funded they can't spend too much time going to meetings for CSEPP.

L. Coonrad: may need to increase funded time for protective action zone (PAZ) planners.

C. Combs: We spend too much time administering the program and not planning. You can easily get distracted and lose sight of what you're doing. The program should work for the planners and not vice versa.

L. Coonrad: Do you have listed, and on record, the top 10 things you should do if a CAI occurs? These are very critical. These are your initial actions.

L. Weiler: planners don't have time to brief others. Decisions are often made independent of planners.

L. Coonrad: turnover of personnel causes problems-need to keep folks apprised.

Steve DeBow, Washington: The process is broken – there is no feedback into planning. Exercises, incidents, and sync matrices provide information for the process but that information doesn't get fed back into the plan.

W. Thomas: The sequence should be: plan-train-exercise-plan.

Pat Duggan, Kentucky: What is new about this? These same questions should have been answered for any hazmat accident. Why does CSEPP have to be unique? Why can't all solutions be integrated? What do we do for everything else? The answers are the same. Planning and response should be integrated for all hazards.

Marianne Rutishauser: Tooele County had no plan or emergency management staff before CSEPP. They had to define and then learn their jobs when CSEPP started. The state of Utah helped with the training.

P. Duggan: You could borrow from places that don't have CSEPP.

J. Herring: Create a warehouse.

DeeDee Goodson, Talladega, Alabama: A central place for information needs to be established.

L. Coonradt: What I would like to see is a website that provides for interactive response to questions posed. CSEPP has the best automation available and should be able to handle this.

Woody Woodruff, Clark County, Kentucky: There is a cohesive group in place but they need to know what to do. A lot of planners never took a planning course. They need to take one.

J. Herring: We could establish a core curriculum. Need to do it quickly.

M. Rutishauser: In Utah 99% of the time, notification happens according to the plan. This puts the county into an enhanced state of readiness. There is an electronic exchange every day of workplans including the worst case scenario. The depot sends a PAR based on that. Tooele County takes their maximum credible event (MCE) and compares using their own (county) weather. The county may change the PAD. A form has been set up. The PAD is laid out just like their response is to go. The form runs through everything. It goes to DCD and 2 other counties. The Utah hotline notifies lots of people simultaneously. The county conducts dispatcher training that other counties can attend.

W. Thomas: In Utah, is notification given every day the plant is operating?

M. Rutishauser: Yes, and every time the wind changes a new workplan is sent.

A request was made that documents which are provided for inclusion on the website be administered anonymously.

Planning Breakout Session II

The panel for the second planning breakout session included Gary Scronce, IEM, Don Broughton, Madison County, Kentucky, Don Brodersen, ACA, and Charles Williams, Alabama.

Presentation #1: Notification (panel)

Mr. Williams noted that in some places the on and off post communities have different notification forms. In Alabama, the form requires that the time, emergency classification level, area affected, and PAR be identified. Follow on information is sent later. They use e-mail to send the message.

Mr. Broughton explained that Madison County uses a faxed form. Only counties can make a PAD. "Heads-up" calls may go from the depot to the county. Also, Madison County notifies the depot if there is an off-post emergency. It's not a one way street.

Mr. Brodersen recommended that if you negotiate an MOA for alert and notification, then be sure that the on- and off-post communities understand the where and when. You should also ensure legal review. In depot – county negotiations, the state can serve as an honest broker.

Q & A for presentation #1:

Dave Galgani, SBCCOM: What do the counties do with the depot workplans?

C. Williams: In Alabama they have MCEs for storage. Each county does something else. They have Emergency Alert System (EAS) messages ready to go based on the MCE.

D. Broughton: In Madison County, if no other information exists, the igloo fire MCE becomes the basis for the default PAR/PAD.

Carl White, Newport Chemical Depot: Can you use your automation to send the information instead of a facsimile form?

D. Broughton: They default to paper and pencil if everything quits working. Also, faxes are more widespread.

Carl White: Shared status boards in Newport include hazards, TCPs, etc. This cuts down on phone calls.

C. Williams: In Alabama automation differs from county to county.

Henry Hoffman, AMC Surety Field Activity: Is there an expectation of what non-surety events are expected to be reported to the off-post communities?

C. Williams: Alabama's MOA covers non-surety events and must meet the 5 minute reporting time.

D. Broughton: Non-surety does not mean non-hazard.

H. Hoffman: The broad definition of non-surety events is the issue. Do we need to re-look at the definition and the criteria for reporting?

Joe Herring, FEMA: Does the Alabama MOA define "non-surety events?"

D. Brodersen: No, it is left to the depot to decide what needs to be reported.

J. Herring: What about the Umatilla and Utah chemical events?

D. Brodersen: They both have plans, it is the human element that needs to be factored in. Planning meetings are helping to define the reporting criteria.

C. Williams: Liability issues are hard to define. The more specific the agreements are, the more liable you become.

Butch Reaves, Pine Bluff Chemical Activity: If there are procedures in place do you need an MOA to say the same thing?

C. Williams: in Alabama the county plan references the state emergency operations plan. There is no MOA with the depot.

Don Miller, Washington State: The MOA is a legal agreement, the plans are not. A plan cannot hold another jurisdiction liable. Talk to your lawyer.

H. Hoffman: Recommend not making the plans a substitute for an MOA. Plans contain the detailed procedures. Depots need to be able to change their plans as needed. Just describe the task to be accomplished.

Dave Holm, Colorado OEM: Mutual Aid agreements may not provide for reimbursement. MOAs are good because of the broad authority under some states' constitutions. These agreements help you sort out in advance of emergency what needs to be done. Lack of agreements does not preclude response.

C. Williams: Be sure to involve your attorneys.

Presentation #2: Agent Toxicity Standards (Mike Myirski, SBCCOM)

The EPA National Advisory Committee on Acute Exposure Guideline Levels (AEGLs) published proposed AEGLs for sulphur mustard (HD) in the Federal Register on March 15, 2000. Proposed AEGLs for GB and VX will be presented to the Committee shortly. CSEPP modeling and automation systems will be updated once the toxicity standards have been finalized. There is potential impact on planning where agent VX is involved.

Q & A for presentation #2:

C. Williams: Alabama produced procedures for PADs. The staff took quantitative risk assessments (QRAs) and MCEs and made a handbook similar to the U.S. Department of Transportation handbook. Is it better to shelter or evacuate? In most cases it's better to shelter in place because the road network would not allow evacuation. This provides quantifiable documentation for decision-making.

D. Broughton: Madison County usually uses the PAR as the PAD.

C. Williams: In Alabama each county does it differently. The decision may be resource driven.

C. White: In Newport an after-hours matrix was created which gives variations of wind, wind speed, and plumes. The depot took it out to the counties and states and asked what they wanted as a PAR from depot. We took it to elected officials to determine what they wanted to see. The matrix decreases the response time. It is numbered for ease in use.

Dave Galgani, SBCCOM: In Alabama, how is the PAD communicated to depot and state?

C. Williams: During non-duty hours it is via the EAS message.

Presentation #3: Sheltering and Sounding All Clear (Mike Myirski, SBCCOM)

Sheltering in place is a simple, common response measure to chemical hazard threats. It is simple to implement. In CSEPP there are four levels of sheltering: (1) normal (go inside, close doors and windows, turn off HVAC, and retreat to interior room); (2) expedient (normal plus use of tape, plastic sheeting and towels to seal off cracks and vents); (3) enhanced (normal plus winterization measures taken in advance); and (4) collective pressurization. Agent concentrations and dosage received indoors are reduced depending the rate of air infiltration, which can be expressed in Air Changes per Hour (ACH). Experimental data suggests protection factors ranging from 3 to 100 can be achieved for normal or expedient sheltering depending on ACH and time duration of exposure. However, to minimize exposure for those sheltered it is critical to exit the shelter when outdoor concentrations drop below indoor concentrations. You cannot wait until outdoor concentrations drop to zero. You can look at the optimal response as a “delayed evacuation” in the sense that you shelter for a while, then evacuate.

D. Broughton: Sheltering in place kits are available in the resource room. The Unical corporation has an excellent video. Madison County has the right to use the video in the kit.

C. Williams: Mike Myirski reported (previously during the conference) that sheltering in place was safe in most cases but you need to consider the amount of time which passes before sounding “all clear.”

Q & A for presentation #3:

C. White: how does Alabama handle other hazardous materials manufacturers?

C. Williams: They have plans and the hazard is not as great.

D. Broughton: DA PAM 50-6 provides much more stringent guidance for planning than is required for other hazardous materials.

3.6 PPE, Monitoring, and Decontamination

Presentation #1: Oregon Health Division Pre-Hospital CSEPP (Bryan Hopkins, State of Oregon PPE Coordinator)

Oregon response staff are using PAPRs due to their operational flexibility and runtime of approximately 10 hours. Incorporated within the mask is an improved voice amplifier. All their masks are being modified to accommodate the new voice system for better communication. The protective suit used by Oregon is the British (ADI Technologies) Mark IV with hood. The suit incorporates light charcoal as a protective filter. The suit is very easy to use and comfortable to

wear. The Army's gloves and boots are used with the suit. The PPE is packaged in an individual first responder customized bag. The bag is kept at fire and police stations due to the equipment's temperature sensitivity. Responders may have up to four bags of equipment at multiple locations to support their various duty locations.

Because of possible cross-contamination during decontamination of responders, Oregon plans to cut the PAPR tube and hook cannister filters to the mask using a "T Bone." Some participants expressed concerns with the cutting of the PAPR tube. The cross-contamination potential was demonstrated. Oregon personnel do not expect to have contamination on the equipment. But because of the possibility of contamination, this is the best solution that they have worked out. The mask exhaust is under the suit so that when the PAPR is running, 4 cubic feet of air a minute flows into the suit from the mask.

Oregon's decontamination operations uses four decon trailers, two for each county. The units are employed as in a HazMat response within the Incident Command System to enable proper employment of resources. Deployed, the unit is stationary and has other accessories. Personnel going thru the trailer DECON procedure shower using soap and tepid water. Responders wearing PPE are decontaminated using a bleach solution. A trailer unit can be set up and operational within 30 minutes. Five personnel can be decontaminated each hour. Hospitals use a DECON tent with showers and a bladder water catching system for run-off. Oregon has a mass casualty DECON capability when incorporating trailer and hospital tent units.

Oregon uses the Improved Chemical Agent Monitors (ICAMs) for monitoring outside the projected plume wedge, personnel after DECON, traffic control points (TCPs) and at hospitals to "sniff" for any lingering agent. ICAMs have a radioactive element that must be licensed with the NRC. The cost of license is very expensive, approximately \$20,000. ICAMs require weekly maintenance checks currently being performed by EMA personnel. An ICAMs maintenance training program is being developed for use by personnel on duty where the ICAMs are stored, such as at Fire Stations.

If the ICAM detects agent or an interferent it takes from several minutes to a hour for the unit to clear. There is a French unit, A2PC, that uses a flame photometric detector that clears in seconds. The A2PC requires calibration and maintenance every 5 years. Oregon is considering buying vehicle mounted A2PCs to perform area monitoring to ensure that they do not have agent spreading beyond the decontamination area.

Performance measures include:

- PPE
 - Percent of responders trained.
 - Written program.
 - PPE issued.
 - Compliance/maintenance program.

- Respiratory Program (example)
 - Medical authorizations.
 - Annual fit testing.
 - Maintenance inspection records.
 - Annual training records.
 - Yearly audit reports.

A pulmonary function test is no longer required by OSHA; a medical questionnaire is sufficient for non-HazMat responders. There is an annual fit test required and the documentation must be maintained for each mask that is fitted. Maintenance records for the masks must be maintained. The annual training records must be maintained and should include a list of everyone that has been trained. There must be an annual inspection of the program with yearly audit reports. Responders must sign off that they know how to use the equipment after they have successfully completed training.

Q & A FOR PRESENTATION #1:

Q: Charles Williams, Alabama EMA: Is there a cross-contamination problem? Myirski indicates there is not.

A: Technically there is not a cross-contamination problem.

Q: How are the variations in PPE being tested?

A: The approved suits were tested.

Q: Do they use stay times?

A: Yes, they do use stay times.

Comment: Scotty McKnight, Industrial Hygienist Field Engineer -- The stay time standard described does not apply to chemical protective suits. They must be really cautious. There is restricted air flow through the suit to help cool the individual.

Q: Jerry Weilacher, PBA: Have they considered using the Army stay times? The ambient temperature is easy to use.

A: The program is changing almost weekly.

Q: Considering the rainfall in Oregon & Washington, is the permeable suit a concern?

A: No, they are prepared for it with aprons, etc. And it is high desert - a low rainfall area.

Q: The ICAM is a qualitative not quantitative detector. Do you have additional testing if agent is detected?

A: Yes, they use the M-256 kit. The M-256 Kits become hazardous waste when they have been used or they expire. They contain mercury which makes them a heavy metal hazard.

Q: Mike Hayes, Little Rock: Is the British suit two piece, has it been tested and do they wear it with a full face mask and hood and what is the shelf-life?

A: Yes, two piece and been tested by SBCCOM and NATO. Full face mask is used but we are going to scrap the hood. Shelf life is ten years. Suits actually “breathes” and is very flexible.

Q: Clark Combs, Kentucky: Using the ICAMs outside the wedge, will antifreeze give you a positive reading and what is the utility of using them when you can only detect GB?

A: Yes, you get a positive reading with anti-freeze and other impurities such as smoke and diesel can affect the unit. We do use M26 in conjunction with the ICAM as a backup. We are looking at the utility of the units and other pieces of equipment that are more reliable and less maintenance intensive.

Q: John Turnauckas, Defense Ammunition Center (DAC): How do you handle non-ambulatory personnel?

A: We are working on system for outside the trailer and hospital tent to handle non-ambulatory personnel.

Presentation #2: Personal Protective Equipment (Robert Weiss, SBCCOM)

There is a list of the approved PAPRs. Since the initial testing there have been additional tests. Domestic Preparedness has tested a full up PAPR system with GB vapor. There are now 3 suits. The Battle Dress Overgarment is no longer being manufactured. The replacement is going to be a joint service light integrated suit. This suit will not be available for use in the CSEP Program. Gloves, boots, hoods, apron and equipment bag are still available and applicable for use. Information on PPE is available on the CSEPP Web site and the Conference Resource Room. NOTE: Mr. Weiss stated the off post monitoring report that was done two years ago by the IPT and is available on the Internet.

Q & A for presentation #2:

Q: For jurisdictions that selected BDOs, what will be the Army policy on BDOs? As they expire they probably cannot be replaced with BDOs. The remaining BDOs are tied up in war reserves. Will addition money be available to replace the BDOs?

A: Yes, they will have to be replaced. PPE was purchased with FY 95 money which goes away at the end of September 2000. New money will be needed. They will also need training money.

Q: Has the PAPR been approved for off-post use?

A: Yes, for escape use only. Oregon is using the PAPRs with monitors to verify there is no agent present. Responders will not be sent into a known chemical environment. The first responders use the ICAMs.

Q: Charles Rolls, Pine Bluff Demil Facility: He had seen a letter a special application suit that would be used within the Demil Facility for welding, did he have any information on it.

A: No, the current list of suits is what is approved and available.

3.7 Public Awareness

Presentation: Panel consisting of Steve Horwitz, FEMA, John Yaquiant, SBCCOM, and Don Jacks, ANL.

In each of the three breakout sessions, Mr. Jacks summarized the pre-conference session on public awareness and performance measurement, and the Umatilla media campaign was presented as a basis for discussion. The session participants then discussed the Umatilla campaign and other aspects of CSEPP public awareness. The discussions from each breakout session are summarized below.

Discussion from Public Affairs Breakout Session #1:

An Arkansas participant suggested an evaluation card be included in the packets sent out to the public. The Arkansas participant also noted that authorities received the most phone calls immediately after the ads aired. A Pueblo County participant suggested attaching a caller ID machine to the answering machine so that even if callers don't leave a message you have their number and can call them back. You'll also be able to more accurately measure the number of calls the ads generate. Other participants expressed concern about populations from outside the planning zone hearing or seeing these messages and becoming worried. The Umatilla participants said they considered it important to educate a large population because they may be indirectly involved in the event of an emergency; also, the information on evacuation/shelter can be used for other incidents, not just CSEPP accidents.

The Umatilla County PIO said there should be a public affairs representative on the overarching IPT. Coordination among Planning, Training and Public Affairs needs to happen to determine shelter in place technical information and what the key messages need to be.

A "rapid response plan" has been developed and implemented at Umatilla because of a non-surety accident and the bomb threats. Local officials saw the need to get information to the public more quickly than they had done. The public is likely to link any accident at a depot with the chemical weapons stockpile. The bottom line was, "We've got to let them know the truth as quickly as possible."

Discussion from Public Affairs Breakout Session #2:

A Kentucky county participant said he thought the commercials weren't high tech enough and would not get the attention of a young audience.

A Washington State PIO talked about creating their key message and how it changed from "When the Whistle Blows ..." to facing their public affairs challenges. The form that the call takers will use should help measure how effective the campaign is by tracking where the caller heard/read the ad, what information they want, etc.

Mr. Horwitz said, if this campaign is effective in Umatilla, funding may be available for other sites to do the same kind of campaign. This funding may be available as early as FY 2001, he said.

What percent of population will the campaign reach? This is a tough question to answer. The Umatilla baseline survey had 22 questions. Of the respondents answering the survey, 73% felt confident they knew what to do if there was an accident at the depot. When asked what is the first thing they would do, 40% said they'd go inside and listen to their TV/radio. Many respondents said they'd go pick up their kids at school – which is not what CSEPP recommends.

Sites wanted a way to share information. Argonne National Laboratory is going to create a “Hotline” website where PIOs/PAOs can exchange information. Counties wanted to know if it will be a secured site or can the general public access it? We believe that it will be a password-protected site.

Agriculture issues: where are they being addressed? In Umatilla, there is basic advice in the calendar. A U.S. Dept. of Agriculture representative expressed concern about how those messages are getting out, if they are at all. Is this a recovery issue? Sheltering livestock, backyard gardens, crop contamination (real or perceived), etc., are addressed in the Radiological Emergency Preparedness Program.

How have the bomb threats affected public awareness? This has not been measured.

A FEMA Region V participant suggested getting a media outlet to do a “public service story” on how to be prepared during an emergency.

A Umatilla Depot PAO said that they had tied their exercise, and events surrounding it, into other events going on in the town. This helped raise awareness.

A Kentucky participant explained that some Kentucky counties are using a campaign called COWS (Community Outdoor Warning Siren) to teach kids in the county about the new outdoor siren system. The theme is that kids hear the phrase COWS and they know to “Mooooove” inside to safety. He believes this is proving effective; he got the idea from somewhere in western Kentucky.

Discussion from Public Affairs Breakout Session #3:

An Oregon representative talked about the topics for the other five commercials that are planned for Umatilla. They will focus on kids in schools (will air in September when school starts with other activities, including Wally Wise); bilingual preparedness; evacuation versus shelter-in-place; and two other topics.

Mr. Horwitz indicated that funding for this type of campaign at other sites would depend on the results of the subsequent surveys at Umatilla (90 and 180 days from the start of the campaign) compared to the baseline survey.

A Kentucky representative indicated that when publicizing a number for inquiries, it is preferable to have a live person answer the telephone rather than a PAO's/PIO's voice mail. The group discussed the possibility of routing those calls to an EOC or other location that would be staffed continuously, or to an answering service.

A Utah representative expressed concern over use of the acronym "CSEPP" without explanation at the conclusion of the pilot media campaign's television ads.

A FEMA Region IV representative mentioned that internet access is not currently paid for by CSEPP. This needs to be changed especially if we're talking about developing the hotline secured website for use as an exchange tool for PA.

Mr. Horwitz asked for volunteers to submit names for potential IPT membership.

Mr. Yaquiant emphasized that we need to plan for non-surety emergencies and false alarms.

3.8 Alert Notification / TAR Distribution

Presentation #1: Alert and Notification System Status (Russ Gates, FEMA HQ)

Mr Gates discussed how the CSEPP tone alert radios at Tooele were the first in the program and are simple and easy to use. Now, they are far more complex and the constant iterations lead to more complexity. FEMA recently released a 17-page document on the specification for tone alert radios. There are 3-4 manufacturers of TARs now. The last purchase of tone alert radios for the program are the 3,500 for Indiana.

The Umatilla site had an accidental alert and notification system (ANS) activation on December 30th. Changes have resulted in alert and notification equipment and procedures. Bell Atlantic did an independent study for a U.S. Senator - 250 pages. A task force of state and county technical people has been formed to review concerns and missed engineering issues. A significant problem in a console was found. Manuals have all been rewritten and vastly improved.

New ANS initiatives at Tooele EMA are underway due to area population growth and changes. They have installed seven new sirens and done seven siren relocations. New "watchdog" software has been installed to check each siren.

Umatilla has been experiencing a vandalism problem with the alert and notification infrastructure. Ten-foot-high fences with concertina wire had to be put up around the repeaters and sirens. There were also weather-related problems from dust storms. The community is discussing a tactical radio system, doing a demonstration with Nextel - 220 MHz system to handle terrain irregularities.

It is hard to diagram who talks to and with whom. First responders converse with a wide number of agencies and response staff. A diagram is critical to deciding on local radio contacts and

technology needed at a site. This is part of a radio coordination initiative to provide redundancy and improve efficiency.

Presentation #2: Alert and Notification in Tooele County (Kari Sagers, Tooele County Director of Emergency Management)

Ms. Sagers discussed how Tooele County put in its radio infrastructure backbone in 1993 and started installing radios in 1994. The County has evaluated the ANS process continually and made the necessary adjustments. Now it is in a maintenance mode.

The first thing Tooele EMA did was to get information out to the public about TARs. Specifications had not been developed at that time by FEMA, Army, or CSEPP. The incinerator facility was under construction, so Tooele EMA forged ahead. They checked what was in place and saw that the weather service radio system was simple and in place and working. A critical issue was dealing with the rumor that the government wanted to use the TAR black boxes to listen to families. Tooele strategized with the Weather Service, which was thrilled about the opportunity for expanding its system. A memorandum of understanding (MOU) was written. Tooele decided to use the basic weather radio.

The area around Deseret is very rural. People appreciated the weather radios because they provided more accurate weather forecasts than commercial radios. Residents liked to have the information on other emergencies too. Tooele offered to be the primary on CSEPP accidents and a backup or secondary information source on weather, and vice versa for the Weather Service. Tooele put in a repeater system and that benefitted the Weather Service too. Tooele's ANS system would not work for everyone.

Delivery of TARs was an issue. One option, which was popular, was to have town meetings with donuts and coffee. To combat misinformation out there, Tooele County sent people door to door in pairs. They handed out a radio, simple instructions, a brochure, shelter-in-place kit, and laminated information on evacuation and sheltering. It was a thorough effort and very positive comments were received. Lots of questions were asked and Tooele EMA people were glad they could provide answers. The radios are not location specific; all radios are activated at once. People in the PAZ are encouraged to purchase their own radios. Tooele has tailored all its messages to accommodate each community.

Tooele has put an identification system into action, using a bar code on each radio and then building a database to store the information. The purpose is to keep track of radios, problem issues, and failure rates (very low). Now that Tooele County is growing so fast, Tooele tries to track TARs between those moving in and out of the area. They are working with three groups to track movers - realtors, the assessors' office, and garbage collection companies. Tooele is sending newcomer packages to each new arrival in the area.

Q & A for presentation #2:

Q: How long did it take you go door-to-door?

A: Took a few months, went out a couple days a week.

Q: How much trouble to keep radio tuned to correct station?

A: Always a problem, people do not call if there is problem. Tooele EMA finds out in meetings or in conversations. The EMA tries to put out the information that Tooele EMA will be happy to help with TAR problems.

Q: Issue of mobile society and can electric utilities help identify newcomers?

A: Have talked with the area utility, but there has been a problem in getting cooperation. We will relook at it.

Presentation #3: Pueblo County radio initiative (Carl Ballinger, Pueblo County CSEPP Coordinator)

Mr. Ballinger discussed the recent Pueblo County radio initiative. They bought Federal Signal radios (the same kind Umatilla bought) and will broadcast over the Weather Service radio. The County 911 has access to it and can broadcast over the TARs. There are 900 households in the Immediate Response Zone (IRZ). It has been difficult, but they are near the end. In 1995, they determined they needed 3,000 TARs and were given the needed funds. At the time, there were no TAR specifications from FEMA, Army, or CSEPP (FEMA and the Army came out with TAR specifications in 1997). The County got bids from several vendors, but no one could provide a working model. One vendor promised to build 10 test radios, but that did not occur. So, in 1999 Pueblo County put out a new request for proposals and received the necessary radios in January, 2000. The County created a database for TAR data, tested the radios, developed a GIS system to place them, and is ready to go. They decided against contracting with area volunteer fire departments due to concerns that the legal department had and restrictions they wanted to have in force.

Distribution started in March and 350 TARs have been placed in residences. The County EMA is doing the delivery itself. It takes approximately 20-30 minutes per house depending on the number of questions being asked by the homeowner. The county targets a neighborhood at a time. A brochure is mailed in advance of knocking on a household door. If no one is home, then a tag is left on the door requesting the homeowner call for an appointment to receive another visit and their TAR. There have been 3-4 people who so far have said no to a TAR. Most have been very receptive. They love having the weather radio and the broadcast information on bad weather - hail, tornadoes, thundershowers, etc. A 24-hour hot line has been established for TAR questions and problems - a recorded message can be left if there is a problem and callback is then made to the residence to resolve the problem or to answer a question. Problems with the infrastructure have occurred, but have been resolved. One significant problem was when the event codes were put in for a weekly test, which inadvertently activated a scrolled message on a local television cable. The County EMA was fortunate to see the beginning of the scrolled message and halt it before it became a problem.

Presentation #4: Jefferson County, AR TAR installation (Jim Featherston, Jefferson County Director of Emergency Preparedness)

Mr. Featherston discussed his TAR installation process beginning with a 1995 contract with TRW for TARs, but Underwriters Laboratories, Inc. (UL) testing did not approve the submitted TARs. So, a two- to three-year delay occurred until an approved radio was provided. The local volunteer fire departments were paid to distribute the TARs and people were told to place them near a window and on the side of the house where the Arsenal was. The Guard was also given radios to deliver, but took longer to accomplish the task. The distribution process gave the departments a chance to view their area of coverage. The contract was one per house. But, the issue of whether to place more than one in each school and special facility occurred and was resolved in that multiple TARs were provided. There was also the issue of how to distribute to units in mobile home parks (12,400) and apartment complexes.

Jefferson County is into the second generation of the control station, but is having problems again. FEMA guidance says 12 minutes for A&N, and the system worked fine at an exercise. But someone kept the transmitter key held down for the whole time, and it burned out. The 1990 census was the basis of the order, but it is outdated now. We thought there were 9,000 in the IRZ, but there appear to be about 10,500. They have also distributed out into the PAZ to special facilities and large population concentrations. Recently, for a tornado, the TARs were activated and they saved lives. People thanked the CSEPP program.

The technical part of the TAR is very difficult. First, there have been numerous problems with the maintenance of the boards. Then, about 300 TARs have been unresponsive due to not receiving a signal. In one case the user was too fast with the mouse and a default signal was inadvertently sent activating all zones, rather than the one chosen. The county has already done an upgrade two years into the program. They have lost some TARs as people move and take them with them; replacements are \$175 apiece. During installation, few antennas were put in (cost \$60 from contractor, but really cost a few dollars locally). If Jefferson County had to do it again it would piggyback on the Weather Service system as others have done. While the TARs can be used for tornadoes and other emergencies, they are not keyed continuously into the Weather Service.

Q & A for presentation #4:

Q: How many TARs do you have in reserve and what of those who move?

A: We use water companies to provide information on who is moving in and out. We also use radio and TV spots to let people know about the TAR. We don't think we will have to purchase more. We have some extra TARs and the population is not growing. We're looking at going through the Weather Service Safe System in the future.

Q: What of special-needs persons?

A: We have a great special-needs database developed by the fire departments during distribution and know where each person lives based on the radio database. We can actually deliver the tone from the 911 center and the County EMA. There is lots of redundancy on who can send out signals.

Q: Is there a legal issue with getting information on households from the U.S. Post Office?

A: There are two rural post offices in Pueblo and both help. For Tooele, with rural routes and post office boxes, the post office will not help. In Grant County, everyone has to have a 911 address, so this helps as residents come through both Grant and Jefferson counties for addressing. The U.S. Post Office will not help with Jefferson County.

Presentation #5: TAR distribution in Oregon (Jesse Seigal, FEMA Region X)

Mr. Seigal discussed distribution of TARs in Oregon. They were to use the Tandy Model, the same as being used in Pueblo. Morrow County put out a request for proposals in 1996, which ended in litigation in 1998, so it asked FEMA to do the procurement and installation. When TARs became available from Federal Signal, FEMA undertook their distribution. In July 1999, FEMA put out an RFP for distribution and contracted with Radio Service Company. The first TAR was installed on May 2, 2000, and now 8,900 have been installed. The contract was for 15,000 to cover the area, but there are not as many houses as expected. They should complete the installation within the six-month window. There were to be nine sectors receiving TARs, but some sectors have been subdivided so the total will be 11. One sector is technically in the PAZ.

In the Radio Service Company contract, all employees had to pass a criminal check, be bonded, pass a drug test, and be employed from a local community. Most employees are locally employed and do the distribution on nights and weekends. They wear reflective vests, have a badge, and offer an 800 number to verify their employer. There have been press releases to let people know when they will be in an area. They leave a tag on a door when no one is home. Approximately 1,000 have not called back when tags have been left. The contract specifies that a maximum of 2 visits will be made to reach a person. People are asked to sign a waiver if they refuse a TAR, but some refuse to sign the waiver. There are 90 people on staff, with 70 doing door-to-door installations. There are about 300 vacant houses. They also go to plants, warehouses, farms, shops, hotels, and recreational vehicle parks. The TARs are addressed by sector and programmable. They are tested weekly, silently. During installation, people are told which sector they are in and this has helped. There is no county door-to-door public information campaign, so FEMA and the CSEPP community thought how to best do some education through the Radio Service Company. FEMA came up with an informational booklet in cooperation with the CSEPP community on how to use the TAR, what is sheltering, how to evacuate, and provided an 800 number to call about the TAR and its installation. This number will be turned over the county, for later use, as a means receive questions and provide information. Messages on the TARs are in English and Spanish.

Q: Are the distributors checking each radio as they do the installation and leave it behind?

A: The radios are tested in the shop in Oregon, not in the house. In Arkansas, if there is a clear weather radio signal, then the radio is considered working. A strobe or antenna, if needed, will be added by a separate technical crew. There have been 100 internal antennae added so far, no outside ones. Two different strobes are being used and there have been 31 residential and 17 industrial installed so far.

Q: How much does it cost to install a radio?

A: FEMA wanted to pay \$7 an hour to place a radio. They were told \$25. Alabama pays \$44 per installed radio.

Q: How many TARs are installed a day?

A: It's different each day. In two months they have installed 9,000.

Q: Does Oregon give out spares?

A: Businesses can receive two or three radios. Special needs people will be given one or more additional radios. Hotels and motels can, at the discretion of the owner, have as many as needed. Schools often have radios in the central office, but will now put them in hallways and maybe each classroom, since teachers are there on weekends and nights. This is a FEMA funding issue. Tooele County will put several in a home, if needed, and are going to put them in school hallways. Tooele County has no hotels.

Q: Can self-installation kits be created? Can you offer radios and an 800 line for self-installation in the future?

A: Do not think so.

3.9 Collection Protection / Overpressurization / Enhanced Shelter

Presentation: Building Collective Protection (Richard Heiden, COE-Omaha District Protective Design Center, and William Blewett, USA Edgewood CB Center, Aberdeen Proving Ground, MD)

Mr. Heiden described the Army Corps of Engineers Protective Design Center mission and current activities. He then discussed Building Collective Protection. Specific items discussed included building leakage measurement, typical overpressure systems, modification of existing buildings, and enhanced shelter-in-place.

Mr. Blewett described studies on sheltering over the years, from unventilated gas-proof shelters during WW I through the present. Normally, passive shelters are only good for short durations. The air exchange rate must be reduced before an airborne contaminant arrives, then increased after the plume passes, or else sheltering provides little overall protection. He discussed air exchange rates, and commented on variables that affect exchange rates. Protection factors vary from one (i.e. no protection) to as much as 100,000 with filtered positive pressure. Mr. Blewett then spoke about expedient and enhanced shelters, and tests done to measure the protection provided by various techniques. He also described protection provided by indoor air purifiers.

Q: What is the expected life of indoor air purifier filters?

A: Should install a new filter when there is notification of a release. A newly installed filter will have sufficient capacity for any CSEPP incident. Overall filter life varies depending on the environment in which filter operates.

Mr. Heiden displayed some manufacturers' recommendations of filter replacement suggestions and costs. It was mentioned by a conferee in the audience that shelter-in-place resource kits are described in the Conference Resource Center.

A Honeywell 11200 Indoor Filter was demonstrated (displayed and turned on for conferees to examine.) The speakers also demonstrated disassembly and filter replacement.

3.10 Government Performance and Results Act (GPRA)

Presentation #1: Dan Civis, FEMA

Mr. Civis began with a presentation on GPRA, and performance measures. GPRA requires federal agencies to collect performance information and report it to Congress. FEMA has implemented GPRA at FEMA HQ and is now implementing it for FEMA programs.

Performance data is needed from State and local organizations to be included in the annual report to Congress. The purpose of GPRA is to provide a management tool to improve program effectiveness and congressional decision making. Performance measures are needed to allocate resources, ensure local needs are met, and place emphasis on critical functions.

Types of measures include input, output, and outcome. Good performance measures are quantifiable, developed by stakeholders, tailored to each site, focused on outcomes, and limited to a vital few measures. There must be a means to gather, verify, and validate performance data.

The structure of performance measures for CSEPP includes three levels: the goal of maximum protection, which was directed by Congress; the FEMA established CSEPP National Benchmarks as objectives; and CSEPP performance indicators that need to be developed by the communities.

CSEPP performance measures have been evolving as a result of stakeholder input; e.g. an advisory group suggested that the number be reduced with the focus on preparedness instead of on consequence management. Currently four quantitative indicators are being proposed. Performance assessments initiated by the Exercise IPT are being folded in with the CSEPP national performance indicators to derive a standard set of CSEPP performance measures.

The four proposed indicators are: AN-1, receipt of protective action decisions (PADs) by IRZ residents; PEO-1, respondents capable of implementing PAD; CP-1, key planning areas complete and coordinated; and CS-1, communications system availability. These proposed performance indicators involve many of the CSEPP National Benchmarks.

CSEPP performance data collection involves several means including self-assessment, quarterly reports, and exercises. The objective is to identify potential problem areas early and apply corrective action.

The performance measures concept provides a framework for CSEPP activities throughout the year. CSEPP work plans identify tasks to be performed, describe tasks in quantitative terms, identify expected results of task performance (outcome), and identify schedules for performance of tasks.

The following steps should be considered in developing work plans: determine goals and tasks; determine what must be done to reach goals and complete tasks; prioritize the list of tasks; determine what resources are available; determine which tasks can be accomplished with available resources; and give personnel responsibility for tasks.

Mr. Civis concluded his presentation with the following summarization: the CSEPP performance measurement process will integrate exercises, self-assessments and quantitative indicators; quantitative indicators will focus on preparedness; every effort will be made to minimize the burden and maximize the value to stakeholders; stakeholder efforts are providing valuable feedback; and the transition to performance measures will not be an overnight process.

Presentation #2: Joseph Bell, Indiana EMA and Mona Harney, Parke County EMA

Joseph Bell, former CSEPP ETO, Indiana State Emergency Management Agency, and Mona Harney, Parke County EMA Director, gave a presentation on the approach the State of Indiana and Parke County took in work plan development.

Mr. Bell said that he found the January 27, 2000, work plan development guidance to be very well done. He said he considered sections 3.0 and 3.1 to be key areas of the guidance. They used the CSEPP National Benchmarks as their goals. In addition, they generated their own goals to meet the county needs. They chose not to follow all of the guidance, but to interpret it to meet their requirements.

The process consisted of an initial meeting that involved four Parke County staff members and a recorder. The group created 36 goals for Parke County for 2000/2001. It was decided who would have primary and secondary responsibility for their accomplishment. Additional meetings developed additional goals, tasks, and expected outcomes.

The task was based on the guidance. Each task was associated with one, two, or all staff members and described in quantitative terms (when they could). Expected outcomes were identified and task performance was put in a schedule (when it was appropriate).

Mrs. Harney then gave some examples of the products they developed and commented that it was a very good management tool for them. She emphasized that work plans have to have a local priority to be effective and the results are better if someone who understands the process can work with the county staff. They found that the process works best when it is facilitated, not just illustrated.

Q & A (for both presentations):

Q: Henry Hoffman, AMC Surety Field Activity, asked if the performance measures are applicable to the Army as well as the States and counties?

A: Mr. Civis answered that performance measures are applicable to all CSEPP organizations.

Q: Meg Capps, Umatilla County, asked to be provided Region work plans to see how the Region plans to support her counties' preparedness.

A: Mr. Civis answered that FEMA Headquarters must consider a variety of options that may make it easier for States and counties to work with performance measures and that FEMA Headquarters will have to determine which options are doable.

Q: Steve DeBow, Washington Emergency Management Division, asked if the Emergency Management Performance Grant (EMPG) program is using the same approach to performance measures and would there be one FEMA process for all emergency management programs?

A: Mr. Civis answered that he understood the State's desire to have one process, but didn't know yet if it would be possible to have a single process.

Q: Kym Cazier of Oregon Emergency Management asked why the narrative database, work plan, and funding database couldn't be combined into one automation tool?

A: Mr. Civis answered that eventually, the goal is to have one integrated process.

Q: A question was asked about how far we are planning to go to measure public knowledge about emergency notification and response actions?

A: Mr. Civis said that was a good question that needs to be addressed. He gave an example of how Benton County is periodically using its staff to poll the general public after a siren test. He said that this issue of measurement needs to be addressed and options developed and evaluated for applicability to a variety of jurisdictions. He concluded by saying that we don't have all the answers yet.

Q: Charles Scott of Kentucky Division of Emergency Management asked if Parke County intended to quantify their outcomes. He said that Kentucky had sent similar products to Region IV, but they were rejected for not being quantified.

A: Mrs. Harney said that she had not gotten that kind of feedback from Region V.

Q: Mrs. Harney was asked if Parke County was using work plans for their other programs.

A: Mrs. Harney said no.

Q: Another question was asked about how much time had been spent making the work plans.

A: Mrs. Harney responded that it had taken about two weeks to put them together.

Q: Mrs. Harney was asked if any special software applications like Microsoft Project were used in creating the work plans.

A: She said that they just used word processing software.

Q: One member of the audience asked if the work plans submitted by the states could be shared with the other states.

A: Mr. Bell responded that he thought it best if an organization worked initially without the influence of other state work plans since each organization had unique situations. After the initial plans are developed, it might be beneficial to compare their work plans with others. A discussion then followed about the pros and cons of using others' work plans in the development stage of building work plans. Mr. Civis stated that there are a lot of differences between work plans because each State is at a different stage in its preparedness. He said FEMA wants to know what the community's goals are and how they intend to measure the attainment of those goals. FEMA needs stakeholder inputs. He said that there may be ways of sharing work plans, such as placing them on the CSEPP web site, and that those ways need to be explored.

Q: Another question was asked about how work plans should be written about part time positions where there are more CSEPP tasks being performed than CSEPP is paying for.

A: Mr. Civis commented that all work should be documented and this documentation could serve as justification for additional staff requests.

One member of the audience stated that the work plan requirement increased paperwork and distracted staff from doing the tasks that needed to be done. A discussion then followed between several members of the audience about the pros and cons of using the work plan process as a management tool. Some saw developing work plans as an additional burden while others saw it as a tool that was useful in helping their staffs better manage their available time.

Q: A question was asked about whether FEMA will require tracking and comparison of time forecast in the work plans with actual time spent on accomplished tasks.

A: Mr. Civis said that it is up to the states and counties whether they need to track and compare actual times spent on tasks. He said that FEMA is not interested in that kind of detail, but rather wants to know if the state's and county's goals were accomplished.

A county official from Maryland asked if credit could be taken for activities performed in other programs' exercises since the activities exercised were the same as in CSEPP. Mr. Civis said yes.

3.11 Phase-out / Close-down

Presentation: LTC Paula K. Lantzer, SBCCOM and DeRoy Holt, FEMA Region VIII

At the end of CSEPP, what do we do with the CSEPP capability? There needs to be an orderly transition. We need to think about this now because of the budget cycle. We need to request funds early to get the best return possible. CSEPP was supposed to enhance existing programs not start new programs. By Federal law, CSEPP ends when the last weapon is destroyed. There is a point where the money goes away. We need to develop good ideas on what to do.

We do not want to lose well trained people, operations facilities, equipment, or plans. How will people be handled when their positions go away? How do we transition people? Do we need to

retrain them? How do we keep them motivated and on the job until the end? How do we handle the termination benefits? We need to have an economic analysis. What are the performance measures? In some jurisdictions, during the job interview, the job is described as existing only as long as the money exists. Colorado cannot forward fund for future expenses, they cannot put money in a savings account and use it in the end. "Shutdown" appropriations from the federal level could solve the problem. An IPT on how to transition should be done three to four years before shutdown. It maybe possible for some of these workers to work as consultants in the worldwide demilitarization program. Maybe some of these people could work in Domestic Preparedness. We might need to look at a "bonus" or special severance pay for the ones who stay in their positions until the end of the program. In the out years, will there be negotiations on severance packages? We recognize that there are county and state programs that are very different from the federal programs. The end dollars by jurisdiction will vary.

An off-post community plan is needed. An IPT is needed that addresses how to bring down CSEPP. CSEPP has generated a capability; what capability will be required after CSEPP that must be in place while the other hazardous material and secondary waste is taken care of. There is less of a risk from non-stockpile than there is from a HazMat. The law will have to be changed by Congress for there to be funds available after the last weapon is destroyed. The laws and rules can be changed; media attention affected the response at Spring Valley.

It concerns some that they will have to negotiate with state people on when CSEPP people have to go away. We need a plan to ramp the people down, if this can be done in a logical manner it will be great. Every county and state has different personnel rules. It must be done on a case by case basis. There are a lot of issues to be resolved. Many issues can be done in an appropriate partnership approach if they are looked at early. Some policies and decisions may have to be changed. CSEPP is about immediate effects. Is it a CSEPP issue beyond the stockpile? Should this be a PMCD issue? Should we plan now for this?

CSEPP is basically a Base Realignment and Closure (BRAC) type program. When an federal installation is BRACed, everyone is placed on the priority placement list to find a job. When one Army employee was interviewed for a CSEPP job, he was told his job would go away in 2004; now it looks like 2007. Retaining the good people is the major challenge. You have to concentrate on how to keep the good people around. The Johnston Atoll facility is currently having problems with good people leaving. The counties will have problems keeping the good people around. The funds continue until the stockpile is gone.

We are looking at a way to approach this as a win-win program with minimal cost. We are not looking at a golden parachute program. We are looking at people that have been loyal partners keeping the citizens safe. How about the area of motivation? Does anyone have "best practices" to keep the great people out there? Education is one of the great motivators. The key to keeping the people is keeping up the education of the people to keep them competitive. Certification can be good. The certification should be useable in other areas, not just CSEPP positions. It may be a little late in the program for certified CSEPP positions.

Facilities and equipment – off-post real property. The EOCs go to the county. Where does the money come from to run them? Other agencies could move into the EOCs when the EOC is not needed for CSEPP.

When CSEPP goes away, some land owners may want the sirens removed. Some easement language indicates that sirens will be removed when CSEPP no longer requires them. There needs to be a plan and an understanding before we get to the end about how we will remove sirens, etc. Can Pueblo County support the maintenance of 600 sets of PPE after CSEPP? No. Likewise at the end of program, TARs cost a lot more than what we can buy from Radio Shack. The maintenance cost of the 19 outdoor systems is just becoming known. The cost will probably be a killer and the county will not be able to support them. EOC maintenance, communications, etc., will probably be supported by the county. Jurisdictions will have to look at what routine emergency response requires. If a capability is not required, it will go away when the CSEPP cost share goes away. How will changes be funded after CSEPP? The CSEPP system in Pueblo County is in an area of minimal risk for non-CSEPP hazards. The CSEPP equipment may be relocated. How will equipment that is not needed be disposed of?

There are a lot of CSEPP plans out there. What will be done with these plans when CSEPP is over? Maybe the CSEPP plans can be adapted for other things. CSEPP is basically a HazMat program. The plans for special populations can be transitioned to other programs. The sources of information might be transitioned over if proper permission is obtained. There are issues with special populations that can be used to provide a higher level of protection to these people than would be present if there had not been a CSEPP. However, some systems are deleting information on special populations to reduce their liability if there is an error.

Does the stockpile include the secondary waste or just the munitions? No, just the munitions not secondary waste because of public law. There will be no base closure until the secondary wastes are gone. Really there is no risk from the secondary wastes.

Some people have apprehensions about moving into a storage area. How do you get the word out that it is safe to come back? It is a very small percentage of the population that is concerned with stockpile. In public outreach, the Army can do a better job. This is a post-CSEPP issue. There is a lot of money for Domestic Preparedness, and the people that have been trained for CSEPP can be valuable to Domestic Preparedness. CSEPP should tied into the Rapid Assessment and Initial Detection (RAID) teams, etc.

Q & A:

Elaine Chan, FEMA: Utilize EMI or other DOD training assets to help retrain or outplace displaced CSEPP workers. Employee separation packages should be set up now for future employees when the end is near. Earmarking federal money for this is legal, check with your state and county attorneys and build this into your life cycle cost estimate.

COL Pate: DCD has lost 30 guards in the past year and has hired none. We are having a very difficult time recruiting and retaining. We lost a Director recently, and have no ability to offer bonuses to keep people around.

Comment from audience: A company I was working for that was closing a plant offered a bonus if you stayed until a certain date.

Comment from audience: Provide a job fair in similar fields for employees.

Comment from audience: Retention is a difficult task for any company or industry.

Elaine Chan, FEMA: Counties and states should begin to look for income generating sources now that will not interfere with their CSEPP mission but will continue to pay for the systems after CSEPP is gone. Oregon State Police have a system set up for after the program ends.

Comment from audience: We at our county have money set aside to remove the sirens after the program ends.

Comment from audience: At ACS all our software runs on Linux so after the program ends people can utilize the material (whereas they could not afford a Sun server and system administrator).

Audience discussion: Several audience members discussed whether there should be an IPT to discuss this emerging issue.

3.12 Permitting Process and Readiness Certification

The session leader was Terry Hobbs of FEMA HQ with a speaker panel of Drew Lyle, PMCD Environmental Team Leader; Tom Ball, Utah DEQ; and Wayne Thomas, Oregon DEQ.

Presentation #1: Environmental Regulations and Site Permitting (Drew Lyle, PMCD)

Drew Lyle, PMCD Environmental Team Leader discussed the major environmental regulations affecting siting. NEPA and the Resource Conservation and Recovery Act (RCRA) require action prior to construction of a facility. Environmental Impact Statements (EISs) are required. Chem Demil did a programmatic EIS in the 1980s. The Army committed to do EISs for each site. These result in a Records of Decision (ROD) in which the Army indicates what it has decided to do. Site specific EISs have been done for all chemical storage sites except Blue Grass and Pueblo. EISs can take many months to complete. We expect to be able to complete one in eighteen months. Mitigation recommendations coming from EISs can have an effect on CSEPP planning, e.g., improve emergency response planning. EISs don't require anything per se; rather they indicate what should be done. EPA wrote the regulations for RCRA. States get the authority to implement RCRA from the federal government. Most states adopted the federal regulations or something quite like them. The Army applies for a permit from the state. The states issue the permits. RCRA requires that the Army coordinate with the off-post communities. The RCRA

permitting process has taken considerably longer than originally thought. Twenty-four months seems to be about average to get a permit. Modifications require approval before implementation. The State of Oregon RCRA permit for the Umatilla incinerator requires, among other things, that the Governor sign off that the area is prepared for emergencies before starting incineration. Kentucky also has permit conditions related to CSEPP. Politics can throw things into the mix.

Q & A for presentation #1:

Q: Chris Brown, Oregon State Police: can you give me examples of how the Army is helping the communities?

A: Drew Lyle: There is funding through FEMA for improvements in CSEPP areas. The Army works with local communities on emergency preparedness.

A: Terry Hobbs: There are MOUs with the hospitals. The Army provides some training. Mutual aid agreements are in place with local fire departments.

Q: Donna Fuzi, UCD: Chris, were you asking about differences between PMCD and CSEPP?

Q: Deroy Holt, FEMA Region VIII: Does this permit cover destruction of all the other junk that comes with elimination of stockpile?

A: Wayne Thomas: The Oregon permit says all chemical agent.

Q: Deroy Holt: As storage goes away is there any foresight into the future that there has to be some readiness?

A: Drew Lyle: There is always a coordination requirement. As far as CSEPP being around, that is beyond PMCD.

A: Tom Ball: Army regulations require contingency plans for any hazardous waste. CSEPP is seen as an enhancement of the other requirements.

Presentation #2: Demil Permitting in Utah (Tom Ball, Utah DEQ)

Utah is in the process of working to continue the permit. The permit has been modified four hundred times. These permits are living documents. CSEPP is an enhancement to RCRA. The only remaining permit condition is that if agent goes off-post they will respond in accordance with CSEPP plans. These incinerators are the only facilities that monitor their exhaust stack.

Q & A for presentation #2:

Q: Deroy Holt: If they hadn't had the monitor in place they wouldn't have known about the recent release?

A: Tom Ball: True.

Presentation #3: Demil Permitting in Oregon (Wayne Thomas, Oregon DEQ)

The permitting process took ten years. We went through many iterations of notices of deficiencies. The permit is a large document. Public involvement and comment was an important part of reaching the decision to issue the permit. The Environmental Commission is empowered

to issue permits. They heard a lot of comments about the adequacy of emergency preparedness. This led to the permit condition about emergency preparedness. There is a reporting requirement that the Army inform DEQ every 180 days about what is going on in CSEPP. There is also a requirement that the Governor sign off that there is an adequate emergency response program in place to protect the general population. We defined adequate through the IPT process. We are working on a readiness assessment to indicate how the adequacy requirement is being met. We have put together an executive committee to recommend to the Governor when the facility is ready to go. We are using nine performance measures, e.g., public warning, medical services, evacuation or shelter-in-place. We also are using operational scenarios to test our preparedness. These were developed by statistically analyzing all accidents and five years of weather at Umatilla. Eight scenarios were developed by the IPT. In exercises three measures were met and five were failed. The exercise in May generated more positive results than this. We have developed a roadmap to determine where we need to go and how we will get there. The Executive Review Panel has been organized and has met once. The Governor wants an interim decision by the end of the year. The decision to issue the permit was a big decision. The start of this facility is equally big. The State has a 31-item list of things that have to be in place before issuing the permit.

Q & A for presentation #3:

Q: Mike Myirski, SBCCOM: Then next May's exercise is critical to allowing start up?

A: Wayne Thomas: Yes. I don't think the Governor will support the facility in the absence of the exercising demonstrating readiness.

A: Terry Hobbs: I think the exercise will confirm readiness, as we have made a lot of progress.

Q: Bill Howard, Umatilla Co.: The Utah permit has been modified several hundred times. Is there a reality check somewhere that gets away from tweaking the permit all the time?

A: Wayne Thomas: We have approved some ninety modifications. Some involve updating plans in the original document. We need to update these based on experience such as Utah's. Some relate to vendors no longer being around due to time frames. The Army is constantly making improvements based on experience elsewhere.

Comment: Bill Howard: I was thinking of the dunnage furnace. It is bringing up emotions that don't have to be there.

A: Wayne Thomas: Do we want the Army to change to better technologies for dun? This issue is significant and is being investigated. There are throughput considerations.

Comment: Bill Howard: You just survived a major challenge from the environmental sector. It is a problem of opening it up for greater scrutiny.

A: Wayne Thomas: The permit calls for best available technology, so as better technologies arrive we are going to want to see that it is used.

A: Tom Ball: Everything we do is open to public comment. Whatever you pick there will be opposition. Neutralization generates huge amounts of waste. Even if you please the anti-incinerators, you upset the folks opposed to landfill. It is the nature of the business.

Q: Dennis Doherty: As a practical matter, did Utah relax its standards in any way as a result of the Army's settlement with Utah over its ordnance charges? Was the certification process completed before that? Who made the certification?

A: It was almost done. The Deputy Public Director for the State of Utah made the decision.

Q: Chris Brown, Oregon State Police: When is closure?

A: 30 days after the last processing of hazardous waste.

Comment: Donna Fuzi, UCD: CSEPP is tied to the last round.

Terry Hobbs closed the session and thanked the speakers and participants.

4 CLOSING PLENARY SESSION

Introductory Remarks of Russell Salter

Russell Salter of FEMA chaired this session. The purpose of this session is to bring closure to the conference. On Tuesday, we had four day-long pre-conference sessions that covered key CSEP Program components -- public awareness, medical, planning, and exercises and training. Yesterday, we had a plenary session that emphasized the need to flag issues that are integrative in nature. This afternoon, we will hear presentations on each of these four program components that were noted in all of the breakout sessions held yesterday and this morning, including the breakout sessions on these four components as well as those on other subjects. We will also prepare a written conference report that will include additional issues that may not fit into these four areas. Following this presentation, we will retire the colors and close the conference. Mr. Salter then introduced John Yaquiant of SBCCOM, who co-chaired the public awareness breakout sessions with Steve Horwitz of FEMA, to provide the public awareness report.

Presentation #1: Public Awareness (John Yaquiant, SBCCOM)

The breakout sessions produced very fruitful discussions. There is an across-the-board commitment to public awareness and a very positive outlook on the Umatilla public awareness campaign, whose television spots were shown to the plenary session yesterday. The spots are only part of a larger campaign – only one of many public awareness tools. In general, we saw considerable integration at the site level, with regular site meetings involving both the installation public affairs officers and off-post public information officers. The conference was time very well spent.

The basic objective of the proposed FY 2001 public awareness game plan is to increase public awareness of what to do if the sirens sound. This objective was endorsed unanimously by breakout session participants. If as successful as expected, the Umatilla media campaign should be exported to other sites if funding is available. Surveys of parents, educators and the general public should be used to validate activities.

Among the products and activities envisioned in the FY 2001 game plan will be additional publications and videos, CSEPP Awareness Weeks, increased contact with the news media, and smarter use of existing tools. For example, the new CSEPP brochure is scheduled for completion in September or October 2000. The breakout session participants endorsed these products and activities, emphasizing that media editorial boards should be cultivated more intensively, that exercises present an excellent opportunity for media activities, and that existing CSEPP web sites should be updated. Participants also suggested a number of ways to use existing tools more effectively, such as more precise targeting of messages toward young audiences.

Several internal tools could be useful in enhancing public awareness. In particular, a Public Awareness IPT to direct and integrate public awareness issues and resources was suggested by

breakout session participants. In addition, participants felt that an internal website for information sharing would be beneficial.

Finally, several upcoming public awareness products were discussed. There is a need for a family response plan template to be provided on the Internet, which could be modeled after the Florida Family Response Plan. A shelter-in-place video is planned for FY 2001. Breakout session participants suggested that a need exists for an agricultural products fact sheet.

Presentation #2: Medical (Lisa Hammond, FEMA)

Ms. Hammond presented the medical breakout session summary. LTC Dr. David Mukai co-chaired these sessions.

Each breakout session covered a different subject. The first medical breakout was on decontamination. The group decided on several decontamination best practices:

- C For liquid exposure of intact skin, soap and water is best.
- C For wounds, saline solution is best.
- C For vapor exposure, perform “dry decon,” which involves removing outer clothing, shampooing of hair, washing of exposed skin with soap and water.

The second breakout session, which was on triage, identified two best practices:

- C START (simple triage and rapid treatment) system for field triage.
- C For psychogenic casualties, use a multi-step process that divides victims into smaller groups, provides an activity on which they can focus, distributes health information to allay fears, and includes mental health professionals at the triage point.

The third medical breakout session, which focused on toxicological treatment, identified three best practices:

- C Use of age-based protocols, such as the system used at the Atlanta Olympics.
- C Inhalation therapy with atropine-like medications, such as Mark 1 kits or IM/IV administration.
- C Alternative anti-convulsant therapy for nerve agent intoxication – use Diazepam as the drug of choice (existing protocols in most communities include this treatment modality).

The fourth medical breakout session, which focused on administrative and stakeholder support, identified three best practices:

- C Motivate hospital administrators to participate in CSEPP planning by emphasizing hospital public relations value of involvement and recovery cost reductions.
- C Prepare for all hazards, including a chemical agent release, in accordance with JCAHO standards.

- C Promote integration of hospital and emergency planning standards by participating in LEPC meetings and holding regular stakeholder meetings.

In addition, this breakout session heard a presentation on performance measures using FOCUS PDCA. Finally, this session considered future actions and recommended establishing a national medical IPT, holding two annual meetings (one of which would be at the annual CSEPP conference), and exploring use of pediatric auto-injectors.

Presentation #3: Planning and Integration (Joe Herring, FEMA)

Mr. Herring of FEMA presented the planning process breakout session summary. In all, some 23 issues were identified in the sessions, and five additional issues were identified in other component breakout sessions. The following planning and integration issues were identified during the Tuesday pre-conference session:

- C Off-post notification.
- C Integrated PARs and PADs.
- C Sounding all-clear for people sheltered in place.
- C Mass screening and decon.
- C Evacuation vs. sheltering.
- C How to get back into depot after evacuation.
- C When to re-enter evacuated off-post areas.
- C Integration of CSEPP and non-stockpile plans.
- C Sharing of forms, MOAs, plans, ideas.
- C Training issues – new employees, deputy directors, etc.
- C What to do if a false alarm occurs.
- C Reentry and restoration.
- C TARs.

The following planning and integration issues were identified during the planning breakout sessions:

- C Form single-issue working groups.
- C Form site-specific planning group.
- C No authority for planners to conduct drills.
- C Lack of coordination and integration of plans.
- C Need to follow the cycle of continuous improvement.
- C Define non-surety events and establish criteria for notification.
- C Lack of feedback to state and depot after PAD made.
- C Need for reciprocal information exchange.
- C When does the clock start for notification if a heads-up call is placed.

The following integration issues were identified during other breakout sessions during the conference:

- C Need for an off-post monitoring plan.
- C Use of ICAMS in monitoring off-post.
- C Off-post decon procedures.
- C Identification procedures for special-needs populations.
- C Who is in charge (Federal Response Plan (FRP) vs. National Contingency Plan (NCP))

Presentation #4: Exercise and Training (Ron Barker and Robert Norville, FEMA)

Mr. Barker and Mr. Norville, both of FEMA, summarized exercise and training issues from the breakout sessions.

Exercise issues were summarized first. More evaluator training is needed and a new course is under development, which can be delivered by state or FEMA regional exercise training officers. It is hoped that this will help expand the evaluator pool and improve the skills of current evaluators. One question in the breakout sessions was about developing a local scenario design course. The closest relevant class is the FEMA exercise design course. A good method to develop chemical weapons accident scenarios is to work with hazard analysts at the installation, who can help design credible scenarios. The breakout sessions also discussed the concept of mini-exercises. Working within the quarterly CAIRA exercise is one way to do this. Also, out-of-sequence play and drills work well. Another question was how will players integrate into the IPE post-exercise process. We have always received the help of local people after exercises to clarify actions taken during exercises. This will continue. Another expressed concern was to decentralize exercise planning. The community exercise planning team is and will continue to be an integral part of the planning process. The IPE process supports this.

During the training breakout sessions, we emphasized how to determine if training is effective. Some methods are: test after a course; do exercise assessments; carry out practice exercises; and use CAIRA exercises for practice. From a depot came a suggestion that communities be invited to participate in CAIRA exercises. Another suggestion was that real events are excellent opportunities to test for CSEPP performance, e.g., traffic control point staffing. Other ways to enhance training are to develop system to identify individuals who need training and to use capabilities assessments. County coordinators should maintain training records.

Three training issues were identified in other breakout sessions. Training for evacuation and shelter-in-place programs involves both training and public awareness program components. We have a shelter-in-place video, which should be reviewed to assure that it meets needs. A course needs to be developed to assure that PAOs are trained in proper shelter-in-place and evacuation procedures. Second, community awareness was identified as both a training and public awareness issue that needs to be addressed jointly. Third, decontamination training is an integrative issue where training opportunities exist in a variety of formats, including classroom-, video-, and computer-based formats, as well as job aids.

Closing Remarks (Russell Salter, FEMA)

Mr. Salter thanked the presenters and the audience for their contributions. The public awareness program is among the most vital program components. I like the idea of involving the media in exercises. I was amazed at the very specific nature of the medical sessions. Planning integration should have been done a long time ago, but I like what we have achieved now. The idea for many drills is a very good one. Another important area mentioned was the relationship between the FRP and NCP; tabletop exercises at each site to discuss these was suggested. In the training and exercise area, I liked the idea of mini-exercises.

All of us are stakeholders in the process of raising standards. Raising the standard is a community effort. FEMA and the Army will be monitoring performance during 2001. Thanks to all for your input.

Closing Remarks (James Bacon, PMCD)

Mr. Bacon was the next speaker. I am grateful for the opportunity to participate in this conference and to bond the chemical demilitarization program with emergency preparedness. The four basic program components are essential and I saw interaction and the opportunity for leveraging. I have been involved in biological and chemical weapons production and storage for forty years. We have come a long way. You all deserve a pat on the back for your accomplishments. I look forward to continuous improvement in protecting the public and the environment and to eliminating our nation's chemical weapons.

Closing Remarks (Denzel Fisher, ODASA-ESOH)

Mr. Fisher was the final speaker. This has been an interesting conference. Thanks to the State of Arkansas for being such good hosts, to MG Doesburg, Mr. Bacon, LTC Lantzer, and to the installation commanders who were able to attend. This is the first year we invited citizens advisory commissions and the first year where the conference included a session on chemical demilitarization with representatives of state environmental offices. The medical community's presence is unprecedented. Several exceptional breakout sessions occurred. The risk we took in this different format really paid off. The reports from these sessions may facilitate resolution of some of the issues that were raised, even the old ones. We have raised the standards in this conference, in the field, and in headquarters. We need to remain focused on the Army mission of safely storing our chemical weapons and then destroying them.

The color guard then retired the colors. Mr. Salter closed the conference at 3:15 PM.